

June 10, 2015

Via E-mail and Overnight Delivery

Mr. Adam Adams
On Scene Coordinator
U.S. Environmental Protection Agency
Superfund, 6SF-PR
1455 Ross Avenue
Dallas, Texas 75202

**Re: Monthly Progress Report – MAY 2015
Site Monitoring and Stabilization Activities
US Oil Recovery/MCC Recycling Site
400 N Richey/200 N Richey, Pasadena, Texas**

Dear Mr. Adams,

On behalf of the US Oil Recovery (USOR) Site PRP Group (PRP Group), Pastor, Behling & Wheeler, LLC (PBW) is pleased to submit this Monthly Progress Report in accordance with the requirements under Section VIII, Paragraph 21 of the Administrative Order on Consent (AOC) for the USOR and MCC Recycling Site (the Site).

Site Activities

Site activities for this reporting period included: (1) routine Bi-Weekly (twice per week) Site Monitoring by Ramboll Environ US Corporation (Ramboll Environ – formerly ENVIRON International Corporation); (2) sampling of the MCC West Primary Clarifier, MCC East Gravity Thickener, Sand Filter, and Chlorine Contact Tank liquid; (3) sampling of the USOR Containment Pond; and (4) nine pump down responses to remove storm water from Sump 34, Sump 35, Sump 36, Truck Bay 48, the North Tank Farm (NTF) and South Tank Farm (STF) secondary containments, the MCC West Aeration Basin, MCC East Gravity Thickener, and the MCC East Lift Station #1.

Bi-Weekly Site Monitoring – ENVIRON continued routine Bi-weekly Site Monitoring during this reporting period. A total of nine Site Monitoring events were conducted in May 2015. Scanned copies of the completed Site Conditions Checklists (SCCs) are provided as Attachment 1. Photographic documentation of May 2015 Site Monitoring events is included on a CD enclosed with the hard copy of this report. The following provides a brief update of significant Site condition observations from the May 2015 Site Monitoring activities.

Non-routine Site Monitoring Event and Lift Station #1 Overflow - Due to more than 4 inches of rainfall at the Site on May 12 and 13, 2015, Ramboll Environ performed an unscheduled Site Monitoring event on May 13, 2015 to measure freeboard at the site. Ramboll Environ observed limited freeboard in Truck Bay 48 and the North Tank Farm and South Tank Farm secondary containments at USOR, and the Aeration Basin at MCC West. Ramboll Environ also observed that Lift Station #1 at MCC East was overflowing. No sheen was observed on the liquid in Lift Station #1. Ramboll Environ placed absorbent boom around Lift Station #1 as a precaution and the PRP Group notified Adam Adams about the Lift Station #1 overflow. Ramboll Environ initiated a pump down response on May 13 and 14, 2015 to provide additional freeboard in the containment structures and former wastewater treatment plant units, as described below.

Tank Farm Containment Freeboard and Lift Station #1 Overflow - Due to more than 6 inches of rainfall at the site from May 24 through May 26, 2015 and despite preceding pumpdown activities (see below), Ramboll Environ observed zero inches of freeboard in the NTF and STF secondary containments on May 26, 2015. Ramboll Environ also observed that Lift Station #1 at MCC East (former City of Pasadena Wastewater Treatment Plant) was overflowing on this date. No sheen was observed on the liquid in the tank farm containments or in Lift Station #1. Ramboll Environ placed absorbent boom around Lift Station #1 as a precaution. The PRP Group is evaluating options to reduce inflows into Lift Station #1 from other former wastewater treatment plant units and has asked for the City of Pasadena's cooperation (through EPA) to provide assistance in this effort through its knowledge of the former wastewater treatment plant operations.

USOR Storage Hopper USOR-EQ-07 - Also on May 26, 2015, Ramboll Environ observed an apparent sheen on water flowing down the USOR driveway following the aforementioned torrential rainfall event. The source of the sheen was determined to be a portable storage hopper near the southeast corner of the USOR Warehouse Building, labelled USOR-EQ-07, that contained new and used oil filters remaining from former USOR operations. This hopper appeared to have overflowed due to heavy rain in the area and the fact that the hopper lid was not properly seated on the hopper. Ramboll Environ deployed booms and absorbent pads around the hopper. The hopper lid was re-seated on the hopper, and the hopper was covered with plastic sheeting. No sheen from the USOR site was observed in Vince Bayou, although sheen was observed on the USOR driveway. Absorbent pads and booms were deployed where sheen was observed. Booms were also deployed inside the USOR entrance gate to prevent further sheen from leaving the site. Per the removal action AOC and after notifying and consulting with Adam Adams, the PRP Group notified the National Response Center.

On May 28, 2015, PRP Group contractor Effective Environmental (E2) removed oily liquid from the hopper labelled USOR-EQ-07 to provide approximately 6 inches of freeboard in the hopper. E2 replaced the lid of the hopper and removed oil from the sides of the hopper with absorbent pads. E2 also taped a boom around the sides of the hopper to catch any additional oil that may drip and secured poly sheeting over the top of the hopper. E2 power washed the oil stained concrete surface adjacent to the hopper, as well as the pavement to the east of the hopper and south of the USOR parking lot. E2 also removed surface soil, rocks, and vegetation from the area located south of the USOR parking lot that appeared to have some oil staining. The concrete wash water and oily liquid removed from USOR-EQ-07 was placed in two approximately 300-gallon totes in the USOR Warehouse Building and the removed soil was placed in three 55-gallon drums. The PRP Group is currently working with E2 to address these

collected materials and the remaining liquid and oil filters in hopper USOR-EQ-07. Ramboll Environ will continue to monitor this area during future Site Monitoring activities.

Pump Down Responses – Based upon freeboard observation noted during the routine Bi-weekly Site Monitoring on May 7, 2015, Ramboll Environ scheduled a routine pump down response on May 11, 2015 for the NTF secondary containment, Sump 36, Truck Bay 45 and MCC East Lift Station #1. The removal of storm water was conducted on May 11, 2015 as follows:

- NTF – A total of approximately 2,300 gallons (one partial tanker truck load);
- Truck Bay 45 – A total of approximately 2,300 gallons (one partial tanker truck load);
- Sump 36 – A total of approximately 5,322 gallons (one tanker truck load); and
- Lift Station #1 - A total of approximately 5,000 gallons (one tanker truck load).

Due to more than 4 inches of rainfall at the site on May 11 and 12, 2015 and forecasts of upcoming rain at the site, Ramboll Environ scheduled a routine pump down response on May 13 and 14, 2015 for the NTF and STF secondary containments, Truck Bay 48, MCC East Lift Station #1, and MCC West Aeration Basin. Also, Ramboll Environ mobilized a contractor to transfer liquid from the NTF and STF secondary containments to an existing frac tank (#A1475B) at the USOR property on May 13, 2015. Approximately 4,000 gallons of storm water were transferred from the NTF secondary containment and approximately 4,000 gallons of storm water were transferred from the STF secondary containment to a frac tank using a diaphragm pump. In addition to the water pumped into the frac tank, storm water removal was also conducted on May 13, 2015 as follows:

- NTF – A total of approximately 5,500 gallons (one tanker truck load); and
- Lift Station #1 – A total of approximately 3,000 gallons (one tanker truck loads).

Ramboll Environ mobilized a contractor on May 14, 2015 to transfer liquid from MCC East Lift Station #1 to a frac tank (#A178C) brought to the MCC East property due to anticipated additional rainfall. Approximately 21,000 gallons of storm water were transferred from Lift Station #1 to frac tank #A178C using a submersible pump. In addition, approximately 4,000 gallons of storm water were transferred from the NTF secondary containment to frac tank #A1475B at the USOR property. In addition to the water pumped into the frac tanks, storm water removal was also conducted on May 14, 2015 as follows:

- Truck Bay 48 – A total of approximately 3,123 gallons (one partial tanker truck load);
- STF – A total of approximately 5,500 gallons (one tanker truck load); and
- Aeration Basin – A total of approximately 21,500 gallons (five tanker truck loads).

Ramboll Environ initiated a pump down response on May 18, 2015 to remove liquid from frac tank #A178C brought to the MCC East property on May 14, 2015. The removal of storm water was conducted on May 18, 2015 as follows:

- Frac tank #A178C (containing Lift Station #1 water) – A total of approximately 15,450 gallons (three tanker truck loads).

Ramboll Environ initiated a pump down response on May 21, 2015 to remove the remaining liquid from frac tank #A178C brought to the MCC East property on May 14, 2015. The second vacuum truck had remaining capacity in the tank after completely evacuating the frac tank, so storm water was also removed directly from Lift Station #1. The removal of storm water was conducted on May 21, 2015 as follows:

- Frac tank #A178C (containing Lift Station #1 water) – A total of approximately 7,500 gallons (one whole and one partial tanker truck loads); and
- Lift Station #1 - A total of approximately 1,350 gallons (one partial tanker truck loads).

Due to more than 7 inches of rainfall at the site from May 24 through May 27, 2015, and upcoming forecast of additional rain at the site, Ramboll Environ scheduled four pump down responses on May 26 through 29, 2015 for the NTF and STF secondary containments, Sumps 34/35, Sump 36, Truck Bay 48, MCC West Aeration Basin and MCC East Lift Station #1. Ramboll Environ mobilized a contractor on May 26, 2015 to transfer liquid from the NTF secondary containment to a frac tank (#A2851C) brought to the USOR property. Approximately 4,500 gallons of storm water were transferred from the NTF secondary containment to frac tank #A2851C using a submersible pump. In addition to the water pumped into the frac tank, storm water removal was also conducted on May 26, 2015 as follows:

- NTF – A total of approximately 4,998 gallons (one tanker truck load);
- STF – A total of approximately 5,450 gallons (one tanker truck load);
- Sump 36 – A total of approximately 5,481 gallons (one tanker truck load); and
- Lift Station #1 - A total of approximately 9,927 gallons (two tanker truck loads).

Ramboll Environ mobilized a contractor on May 27, 2015 to transfer liquid from MCC East Gravity Thickener to a frac tank (#A3122C) brought to the MCC East property due to anticipated additional rainfall. Approximately 20,000 gallons of storm water were transferred from the Gravity Thickener to frac tank #A3122C using a submersible pump. In addition, approximately 7,500 gallons of storm water were transferred from the NTF secondary containment, approximately 6,000 gallons of storm water was transferred from the STF secondary containment, and approximately 2,000 gallons of storm water were transferred from frac tank #A1475B to frac tank #A2851C at the USOR property. In addition to the water pumped into the frac tank, storm water removal was also conducted on May 27, 2015 as follows:

- STF – A total of approximately 5,480 gallons (one tanker truck load); and
- Lift Station #1 - A total of approximately 5,481 gallons (one tanker truck load).

The removal of storm water was conducted on May 28, 2015 as follows:

- NTF – A total of approximately 5,000 gallons (one tanker truck load);

- STF – A total of approximately 5,000 gallons (one tanker truck load);
- Aeration Basin – A total of approximately 4,800 gallons (one tanker truck load); and
- Lift Station #1 - A total of approximately 24,600 gallons (five tanker truck loads).

The removal of storm water was conducted on May 29, 2015 as follows:

- NTF – A total of approximately 5,000 gallons (one tanker truck load);
- STF – A total of approximately 3,000 gallons (one partial tanker truck load);
- Sumps 34/35 – A total of approximately 2,194 gallons (one partial tanker truck load);
- Sump 36 – A total of approximately 4,950 gallons (one tanker truck load);
- Truck Bay 48 – A total of approximately 2,500 gallons (one partial tanker truck load); and
- Lift Station #1 - A total of approximately 29,600 gallons (six tanker truck loads).

The storm water from all pump down response events was transported off-site to the Intergulf Pasadena, Texas facility for disposal. Scanned copies of the Intergulf Shipping Manifests are included as Attachment 2.

Sampling Activities

In anticipation of future pump down responses, Ramboll Environ collected aqueous samples from the Primary Clarifier at the MCC West property, and the Gravity Thickener, Sand Filter, and Chlorine Contact Tank at the MCC East property on May 18, 2015. Ramboll Environ measured the total depth of water in the Gravity Thickener and the Sand Filter to be approximately 3 feet or less; therefore, in accordance with the approved Site Monitoring and Stabilization Work Plan (the "Work Plan"), one aqueous sample was collected from each of the two structures using a 3 foot long disposable bailer. Ramboll Environ measured the total depth of water in the Primary Clarifier to be approximately 12 feet; therefore, in accordance with the approved Work Plan, one aqueous sample was collected from each of the top half of the water column (0 – 3 feet below water surface) and the bottom half of the water column (9 – 12 feet below water surface) using 3-foot long disposable bailers. Ramboll Environ measured the total depth of water in the Chlorine Contact Tank to be approximately 13 feet; therefore, in accordance with the approved Work Plan, one aqueous sample was collected from each of the top half of the water column (0 – 3 feet below water surface) and the bottom half of the water column (10 – 13 feet below water surface) using 3-foot long disposable bailers. Analytical results and/or validation reports for these samples are currently pending and will be provided in a future monthly progress report.

Additional samples were collected from the Gravity Thickener and Primary Clarifier. Ramboll Environ collected one aqueous sample from the Gravity Thickener and two aqueous samples from the Primary Clarifier on May 21, 2015 using the same method as described above. Analytical results and/or validation reports for these samples are also currently pending and will be provided in a future monthly progress report.

Due to freeboard conditions approaching two feet, Ramboll Environ collected two samples from the Containment Pond on May 26, 2015 in preparation for removal and discharge of accumulated storm water. The samples were collected to provide pre-discharge water quality characterization of the Containment Pond water. The samples were collected in the same method used to collect samples from the Containment Pond on December 27, 2012. Ramboll Environ measured the pond depth approximately 10 feet from the edge of the Containment Pond. The depth was measured to be approximately 5 feet in depth; therefore, ENVIRON collected one sample from a depth of 1.25 feet and one sample from a depth of 3.75 feet to evaluate water quality in the lower and upper half of the water column. A peristaltic pump and dedicated poly tubing were used to obtain the samples. The tubing was extended from the pond berm to the sampling point using a rigid PVC pipe. A Horiba Water Quality Meter was used during sampling to record water quality parameters during purging. The laboratory analytical report and the validation report for these samples are included as Attachment 3.

Next Reporting Period – Anticipated Actions, Issues and Schedule

Routine Site Monitoring activities will continue on a bi-weekly (twice per week) basis. Additional Site activities anticipated for June 2015 include site mowing, and pump down responses, as needed as needed, and potentially, pending submittal and EPA-approval of a work plan addendum, initiation of aboveground storage tank (AST) sludge removal activities. Performance of the aforementioned Containment Pond stormwater discharge event is also anticipated in June 2015.

Thank you for the opportunity to submit this progress report. Please contact us if you have any questions or comments.

Sincerely,

PASTOR, BEHLING & WHEELER, LLC



Eric F. Pastor, P.E.
Principal Engineer
eric.pastor@pbwllc.com
512.671.3434

Attachments

- Attachment 1 – Site Conditions Checklists
- Attachment 2 – May 2015 Intergulf Shipping Manifests
- Attachment 3 – Analytical and Validation Reports – Containment Pond Samples

Attachment 1
Site Conditions Checklists

Date: 5/04/2015

General Information

Day & Date: MONDAY 5/04/2015

Arrival Time: 08:00

Departure Time: 09:05

Type of Visit: ✓ Routine Unscheduled

Site Inspection Personnel:

J. PENNINGTON (ENVIRON)

L. NGUYEN (ENVIRON)

Weather Conditions During Site Visit:

CLEAR SKIES, WIND BLOWING FROM THE SOUTH

Comments (if any):

Weather Forecast and Notable Weather Elements:

General Forecast

PARTLY CLOUDY

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 72/84 | 30% | N/A | N/A |
| MONDAY | <input checked="" type="checkbox"/> | 70/82 | 10% | 0.00 IN | 10-15 MPH, SE |
| TUESDAY | <input type="checkbox"/> | 70/81 | W 30% 40% | 0.25 IN | 10-15 MPH, SE |
| WEDNESDAY | <input type="checkbox"/> | 71/82 | W 40% 30% | 0.08 IN | 10-15 MPH, SE |
| THURSDAY | <input type="checkbox"/> | 71/82 | 20% | 0.04 IN | N/A |
| FRIDAY | <input type="checkbox"/> | 71/83 | 20% | 0.00 IN | N/A |
| SATURDAY | <input type="checkbox"/> | 72/83 | 20% | N/A | N/A |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
 (<http://www.srh.noaa.gov/hgx/?n=forecasts>)

Long Term Outlook

0.75 TO 1.00 INCHES OF RAIN PREDICTED IN THE AREA
 OVER THE NEXT 7 DAYS

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/04/2015

USOR Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

_____ ft 10 inches

South Tank Farm Secondary Containment

_____ ft 9 inches

Sump 34 (estimated)

_____ ft 23 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/04/2015

Sump 35

_____ ft 23 inches

Sump 36

_____ ft 29 inches

Bay 45

_____ ft 6 inches

Bay 48

 ft ⁹ inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

No

Bioreactor

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

Date: 5/04/2015

MCC West Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed ?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Lift Stations #2 and #3

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Potential for Off-Site Migration

Aeration Basin (Final Clarifier)

Yes (No)

Primary Clarifier

Yes (No)

High Rate Trickling Filter

Yes (No)

If Yes, has the Project Coordinator been notified?

Yes No (N/A)

Issues for Potential Corrective Action

NONE

Date: 5/04/2015

MCC East Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

ft 27 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes (No)

If Yes, has the Project Coordinator been notified?

Yes No (N/A)

Potential for Off-Site Migration

Primary Clarifier #1

Yes (No)

Primary Clarifier #2

Yes (No)

Oxygen Digester #1

Yes (No)

Oxygen Digester #2

Yes (No)

Oxygen Activated Sludge Tank

Yes (No)

Former Sand Filter

Yes (No)

Aerobic Digester

Yes (No)

Gravity Thickener

Yes (No)

Date: 5/04/2015

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

Date: 5/04/2015

Summary of Photographs Taken

Photo File Name = PXXX-05042015 (P#-MMDDYYYY)

NONE

Photo Page 1

Date: 5/04/2015

Site Monitoring Explanations

USOR

- NONE

MCC EAST

- NONE

MCC WEST

- NONE

Date: 5/07/2015

General Information

Day & Date: THURSDAY, 5/07/2015

Arrival Time: 07:50

Departure Time: 08:40

Type of Visit: ✓ Routine Unscheduled

Site Inspection Personnel:

J. PENNINGTON (RAMBOLL ENVIRON)

L. NGUYEN (RAMBOLL ENVIRON)

Weather Conditions During Site Visit:

MOSTLY CLOUDY, WIND BLOWING FROM THE EAST

Comments (if any):

Weather Forecast and Notable Weather Elements:

General Forecast

MOSTLY CLOUDY WITH A SLIGHT CHANCE OF SHOWERS AND
ISOLATED THUNDERSTORMS IN THE MORNING, THEN
BECOMING PARTLY CLOUDY WITH A CHANCE OF SHOWERS
AND THUNDERSTORMS IN THE AFTERNOON

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 74/84 | 30% | 0.15 IN | N/A |
| MONDAY | <input type="checkbox"/> | 74/83 | 50% | N/A | N/A |
| TUESDAY | <input type="checkbox"/> | 71/80 | 50% | N/A | N/A |
| WEDNESDAY | <input type="checkbox"/> | 70/79 | 50% | N/A | N/A |
| THURSDAY | <input checked="" type="checkbox"/> | 74/85 | 20% | 0.02 IN | 10-15 MPH, SE |
| FRIDAY | <input type="checkbox"/> | 74/85 | 20% | 0.01 IN | 10-15 MPH, SE |
| SATURDAY | <input type="checkbox"/> | 74/84 | 20% | 0.03 IN | 10-20 MPH, SE |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
<http://www.srh.noaa.gov/hgx/?n=forecasts>

Long Term Outlook

2.50 TO 3.00 INCHES OF RAIN PREDICTED IN THE
AREA OVER THE NEXT 7 DAYS

Date: 5/07/2015**USOR Property****Site and Perimeter Conditions**

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

_____ft 10.5 inches

South Tank Farm Secondary Containment

_____ft 9.5 inches

Sump 34 (estimated)

_____ft 24 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/07/2015

Sump 35

ft 24 inches

Sump 36

_____ft 28 inches

Bay 45

 ft 6 inches

Bay 48

 ft 9 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

No

Bioreactor

Yes

No.

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

MCC West Property

Site and Perimeter Conditions

(circle one)

- | | | |
|---|-----------------------------|--------------------------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed ? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Containment Structures Leaking? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | SEE EXPLANATIONS PAGE → Yes | No |

(Explain all "Yes" answers below)

General Observations

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

Lift Stations #2 and #3

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Caps/Lids Damaged, Missing or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

Potential for Off-Site Migration

- | | | |
|----------------------------------|-----|--------------------------|
| Aeration Basin (Final Clarifier) | Yes | <input type="radio"/> No |
| Primary Clarifier | Yes | <input type="radio"/> No |
| High Rate Trickling Filter | Yes | <input type="radio"/> No |

If Yes, has the Project Coordinator been notified?

| | | |
|-----|----|---------------------------|
| Yes | No | <input type="radio"/> N/A |
|-----|----|---------------------------|

Issues for Potential Corrective Action

NONE

Date: 5/07/2015

MCC East Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
Yes (No)
Yes (No)
Yes (No)
Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
Yes (No)
Yes (No)
Yes (No)

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
Yes (No)
Yes (No)

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

ft 29 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes (No)

If Yes, has the Project Coordinator been notified?

Yes No (N/A)

Potential for Off-Site Migration

Primary Clarifier #1

Yes (No)

Primary Clarifier #2

Yes (No)

Oxygen Digester #1

Yes (No)

Oxygen Digester #2

Yes (No)

Oxygen Activated Sludge Tank

Yes (No)

Former Sand Filter

Yes (No)

Aerobic Digester

Yes (No)

Gravity Thickener

Yes (No)

Date: 5/07/2015

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

Date: 5/07/2015

Summary of Photographs Taken

Photo File Name = PXX-05072015 (P#-MMDDYYYY)

NONE

Photo Page 1

Site Monitoring Explanations

USOR

- NONE

MCC EAST

- NONE

MCC WEST

- TRICKLE FILTER VAULT OBSERVED OVERFLOWING.

NO SHEEN OBSERVED.

Date: 5/11/2015General InformationDay & Date: MONDAY, 5/11/2015Arrival Time: 06:55Departure Time: 09:10Type of Visit: ✓ Routine Unscheduled

Site Inspection Personnel:

J. PENNINGTON (RAMBOLL ENVIRON)L. NGUYEN (RAMBOLL ENVIRON)

Weather Conditions During Site Visit:

OVERCAST, WIND BLOWING FROM THE SOUTH

Comments (if any):

INTERGULF REMOVED APPROXIMATELY 5,322 GALLONS FROM
SUMP 36, 4,600 GALLONS FROM TRUCK BAY 45 AND
NTF, AND 5,000 GALLONS FROM MCC EAST
LIFT STATION #1 FOR OFF-SITE DISPOSAL AT
INTERGULF'S PASADENA, TEXAS FACILITY.

Weather Forecast and Notable Weather Elements:

General Forecast

SHOWERS AND THUNDERSTORMS IN THE MORNING, THEN SHOWERS
AND THUNDERSTORMS LIKELY IN THE AFTERNOON

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 75/85 | 20% | 0.00 IN | N/A |
| MONDAY | <input checked="" type="checkbox"/> | 73/82 | 60% | 0.49 IN | 10-15MPH, SE |
| TUESDAY | <input type="checkbox"/> | 73/82 | 70% | 0.61 IN | 10-15MPH, E |
| WEDNESDAY | <input type="checkbox"/> | 72/82 | 40% | 0.38 IN | 10-15MPH, SE |
| THURSDAY | <input type="checkbox"/> | 72/82 | 40% | 0.12 IN | N/A |
| FRIDAY | <input type="checkbox"/> | 72/84 | 30% | 0.06 IN | N/A |
| SATURDAY | <input type="checkbox"/> | 73/85 | 30% | 0.02 IN | N/A |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
(<http://www.srh.noaa.gov/hgx/?n=forecasts>)

Long Term Outlook

1.75 TO 2.00 INCHES OF RAIN PREDICTED IN THE AREA
OVER THE NEXT 7 DAYS.

Date: 5/11/2015

USOR Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

ft 12 inches

South Tank Farm Secondary Containment

ft 10 inches

Sump 34 (estimated)

ft 23 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/11/2015

Sump 35

 ft 23 inches

Sump 36

_____ ft 60 inches

Bay 45

_____ ft 30 inches

Bay 48

_____ ft 9 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

No

Bioreactor

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

(N/A)

Issues for Potential Corrective Action

NONE

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/11/2015

MCC West Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed ?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Lift Stations #2 and #3

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Potential for Off-Site Migration

Aeration Basin (Final Clarifier)

Yes

No

Primary Clarifier

Yes

No

High Rate Trickling Filter

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

MCC East Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

____ ft 30 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes (No)

If Yes, has the Project Coordinator been notified?

Yes No (N/A)

Potential for Off-Site Migration

Primary Clarifier #1

Yes (No)

Primary Clarifier #2

Yes (No)

Oxygen Digester #1

Yes (No)

Oxygen Digester #2

Yes (No)

Oxygen Activated Sludge Tank

Yes (No)

Former Sand Filter

Yes (No)

Aerobic Digester

Yes (No)

Gravity Thickener

Yes (No)

Date: 5/11/2015

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

Date: 5/11/2015

Summary of Photographs Taken

Photo File Name = PXXX-05112015 (P#-MMDDYYYY)

NONE

Site Monitoring Explanations

USOR

-NONE

MCC EAST

-NONE

MCC WEST

-NONE

Date: 5/14/2015General InformationDay & Date: THURSDAY, 5/14/2015Arrival Time: 09:00Departure Time: 10:30Type of Visit: ☒ Routine ☐ Unscheduled

Site Inspection Personnel:

L. PENNINGTON (RAMBOLL ENVIRON)L. NGUYEN (RAMBOLL ENVIRON)

Weather Conditions During Site Visit:

LN PARTLY PARTLY CLOUDY, WIND BLOWING FROM
THE SOUTH

Comments (if any):

APPROXIMATELY 3,123 GALLONS WAS REMOVED FROM TRUCK
BAY 4B, LN APPROXIMATELY
APPROXIMATELY 5,500 GALLONS WAS REMOVED FROM STE, AND
APPROXIMATELY 2,500 GALLONS WAS REMOVED FROM
MCC WEST AERATION BASIN LN FOR OFF-SITE
DISPOSAL AT INTERGULF'S PASADENA, TEXAS
FACILITY.

Weather Forecast and Notable Weather Elements:

General Forecast

PARTLY CLOUDY . CHANCE OF SHOWERS AND THUNDERSTORMS
IN THE MORNING & AFTERNOON .

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 76/84 | 30% | 0.10 IN | N/A |
| MONDAY | <input type="checkbox"/> | 75/84 | 40% | 0.04 IN | N/A |
| TUESDAY | <input type="checkbox"/> | 73/84 | 40% | N/A | N/A |
| WEDNESDAY | <input type="checkbox"/> | 73/85 | 30% | N/A | N/A |
| THURSDAY | <input checked="" type="checkbox"/> | 74/85 | 40% | 0.03 IN | 10-15MPH, SE |
| FRIDAY | <input type="checkbox"/> | 74/83 | 50% | 0.29 IN | 10-15MPH, SE |
| SATURDAY | <input type="checkbox"/> | 74/85 | 40% | 0.04 IN | 10-15MPH, SE |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
<http://www.srh.noaa.gov/hgx/?n=forecasts>

Long Term Outlook

0.25 TO 0.50 INCHES OF RAIN PREDICTED IN
THE AREA OVER THE NEXT 7 DAYS

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/14/2015

USOR Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒
Yes ☐ No ☒

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

_____ ft 10 inches

South Tank Farm Secondary Containment

_____ ft 10 inches

Sump 34 (estimated)

_____ ft 17 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/14/2015

Sump 35

_____ft 17 inches

Sump 36

_____ ft 30 inches

Bay 45

_____ ft 30 inches

Bay 48

ft 21 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

No

Bioreactor

Yes

☒ No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

MCC West Property**Site and Perimeter Conditions**

(circle one)

- | | | |
|---|-----------------------------|--------------------------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed ? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Containment Structures Leaking? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | SEE EXPLANATIONS PAGE → Yes | No |
- (Explain all "Yes" answers below)

General Observations

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Lift Stations #2 and #3

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Caps/Lids Damaged, Missing or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Potential for Off-Site Migration

- | | | |
|----------------------------------|-----|--------------------------|
| Aeration Basin (Final Clarifier) | Yes | <input type="radio"/> No |
| Primary Clarifier | Yes | <input type="radio"/> No |
| High Rate Trickling Filter | Yes | <input type="radio"/> No |

If Yes, has the Project Coordinator been notified?

Yes

No

☐ N/A

Issues for Potential Corrective Action

NONE

MCC East Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes No
Yes No
Yes No
Yes No
Yes No

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes No
Yes No
Yes No
Yes No

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes No
Yes No
Yes No

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

ft 24 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes No

If Yes, has the Project Coordinator been notified?

Yes No N/A

Potential for Off-Site Migration

Primary Clarifier #1

Yes No

Primary Clarifier #2

Yes No

Oxygen Digester #1

Yes No

Oxygen Digester #2

Yes No

Oxygen Activated Sludge Tank

Yes No

Former Sand Filter

Yes No

Aerobic Digester

Yes No

Gravity Thickener

Yes No

Date: 5/14/2015

If Yes, has the Project Coordinator been notified?

Yes

No

(N/A)

Issues for Potential Corrective Action

NONE

Date: 5/14/2015

Summary of Photographs Taken

Photo File Name = PXXX-05142015 (P#-MMDDYYYY)

NONE

Photo Page 1

Site Monitoring Explanations

USOR

- NONE

MCC EAST

- NONE

MCC WEST

- HEADLOCKS PIPE OBSERVED DRIPPING. NO SHEEN
OBSERVED.

- HEADLOCKS SLIMP OBSERVED OVERFLOWING. NO
SHEEN OBSERVED.

General InformationDay & Date: MONDAY 5/18/2015Arrival Time: 07:00Departure Time: 11:40Type of Visit: ☒ Routine ☐ Unscheduled

Site Inspection Personnel:

J. ROSS (RAMBOLL ENVIRON)L. NGUYEN (RAMBOLL ENVIRON)

Weather Conditions During Site Visit:

OVERCAST, OCCASIONAL LIGHT RAIN

Comments (if any):

RAMBOLL ENVIRON COLLECTED A SAMPLE FROM MCC EAST GRAVITY THICKENER, A SAMPLE FROM MCC EAST SAND FILTER, TWO SAMPLES FROM MCC ~~WEST~~ EAST CHLORINE CONTACT TANK, AND TWO SAMPLES FROM MCC WEST PRIMARY CLARIFIER. INTERGULF REMOVED APPROXIMATELY 15,450 GALLONS FROM FRAC TANK A17BC AT MCC ~~WEST~~ LN EAST, WHICH CONTAINS LIQUID FROM LIFT STATION #1, FOR OFF-SITE DISPOSAL AT INTERGULF'S PASADENA, TEXAS FACILITY.

Weather Forecast and Notable Weather Elements:

General Forecast

MOSTLY CLOUDY WITH SHOWERS AND THUNDERSTORMS
LIKELY IN EARLY MORNING THEN PARTLY CLOUDY WITH A
CHANCE OF SHOWERS AND THUNDERSTORMS IN THE
AFTERNOON

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 76/86 | 40% | N/A | N/A |
| MONDAY | <input checked="" type="checkbox"/> | 75/85 | 60% | 0.23 IN | 5-10 MPH, SE |
| TUESDAY | <input type="checkbox"/> | 75/85 | 20% | 0.00 IN | 10-15 MPH, SE |
| WEDNESDAY | <input type="checkbox"/> | 75/87 | 20% | 0.00 IN | 10-15 MPH, S |
| THURSDAY | <input type="checkbox"/> | 74/86 | 20% | 0.01 IN | N/A |
| FRIDAY | <input type="checkbox"/> | 74/86 | 30% | N/A | N/A |
| SATURDAY | <input type="checkbox"/> | 74/86 | 20% | N/A | N/A |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
 (<http://www.srh.noaa.gov/hgx/?n=forecasts>)

Long Term Outlook

0.75 TO 1.00 INCHES OF RAIN PREDICTED IN THE AREA
OVER THE NEXT 7 DAYS.

USOR Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

_____ ft 10 inches

South Tank Farm Secondary Containment

_____ ft 9 inches

Sump 34 (estimated)

_____ ft 15 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/18/2015

Sump 35

 ft 15 inches

Sump 36

 ft 30 inches

Bay 45

ft 30 inches

Bay 48

 ft 21 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

No

Bioreactor

Yes

(No)

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

MCC West Property**Site and Perimeter Conditions**

(circle one)

- | | | |
|---|-----------------------------|--------------------------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed ? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Containment Structures Leaking? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | SEE EXPLANATIONS PAGE → Yes | No |
- (Explain all "Yes" answers below)

General Observations

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Lift Stations #2 and #3

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Caps/Lids Damaged, Missing or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Potential for Off-Site Migration

- | | | |
|----------------------------------|-----|--------------------------|
| Aeration Basin (Final Clarifier) | Yes | <input type="radio"/> No |
| Primary Clarifier | Yes | <input type="radio"/> No |
| High Rate Trickling Filter | Yes | <input type="radio"/> No |

If Yes, has the Project Coordinator been notified?

Yes

No

☐ N/A

Issues for Potential Corrective Action

NONE

Date: 5/18/2015**MCC East Property****Site and Perimeter Conditions**

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes ☐ No ☒

Yes ☐ No ☒

Yes ☐ No ☒

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

 ft 24 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes ☐ No ☒

If Yes, has the Project Coordinator been notified?

Yes ☐ No ☒ N/A**Potential for Off-Site Migration**

Primary Clarifier #1

Yes ☐ No ☒

Primary Clarifier #2

Yes ☐ No ☒

Oxygen Digester #1

Yes ☐ No ☒

Oxygen Digester #2

Yes ☐ No ☒

Oxygen Activated Sludge Tank

Yes ☐ No ☒

Former Sand Filter

Yes ☐ No ☒

Aerobic Digester

Yes ☐ No ☒

Gravity Thickener

Yes ☐ No ☒

Date: 5/18/2015

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

USOR-MCC Bi-Weekly Site Monitoring Checklist

LN
Date: 5/2 5/18/2015

Summary of Photographs Taken

Photo File Name = PXXX-05182015 (P#-MMDDYYYY)

NONE

Date: 5/18/2015

Site Monitoring Explanations

USOR

- NONE

MCC EAST

- NONE

MCC WEST

- HEADWORKS PIPE OBSERVED NOT DRIPPING.

- HEADWORKS SUMP OBSERVED NOT OVERFLOWING.

General InformationDay & Date: THURSDAY, 5/21/2015Arrival Time: 08:00Departure Time: 10:15Type of Visit: ✓ Routine Unscheduled

Site Inspection Personnel:

D. ERGIN (RAMBOLL ENVIRON)L. NGUYEN (RAMBOLL ENVIRON)J. PATTERSON (WESTON)

Weather Conditions During Site Visit:

PARTLY CLOUDY, WIND BLOWING FROM THE SOUTH

Comments (if any):

INTERGULF REMOVED APPROXIMATELY 7,500 GALLONS FROM PRAK
TANK A178C, LOCATED AT MCC EAST AND CONTAINING LIQUID FROM
LIFT STATION #1, AND 1,350 GALLONS FROM MCC EAST
LIFT STATION #1 FOR OFF-SITE ^{W/ DISPOSAL} REMOVE AT INTERGULF'S
PASADENA, TEXAS FACILITY. RAMBOLL ENVIRON COLLECTED ONE
SAMPLE FROM MCC EAST GRAVITY THICKENER AND TWO SAMPLES
FROM MCC WEST PRIMARY CLARIFIER.

Weather Forecast and Notable Weather Elements:

General Forecast

A CHANCE OF SHOWERS AND THUNDERSTORMS IN THE MORNING,
~~THEN A CHANCE OF~~ ^{LN} SHOWERS AND THUNDERSTORMS LIKELY IN THE
AFTERNOON

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 75/84 | 40% | 0.09 IN | NA |
| MONDAY | <input type="checkbox"/> | 76/84 | 60% | 0.16 IN | NA |
| TUESDAY | <input type="checkbox"/> | 75/85 | 40% | NA | NA |
| WEDNESDAY | <input type="checkbox"/> | 75/85 | 30% | NA | NA |
| THURSDAY | <input checked="" type="checkbox"/> | 74/85 | 60% | 0.21 IN | 5 MPH, NE |
| FRIDAY | <input type="checkbox"/> | 74/83 | 40% | 0.12 IN | 10-15 MPH, SE |
| SATURDAY | <input type="checkbox"/> | 74/84 | 20% | 0.06 IN | 10-15 MPH, SE |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
<http://www.srh.noaa.gov/hgx/?n=forecasts>

Long Term Outlook

3.00 TO 4.00 INCHES OF RAIN PREDICTED IN THE AREA
OVER THE NEXT 7 DAYS

USOR Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

ft 10 inches

South Tank Farm Secondary Containment

ft 9 inches

Sump 34 (estimated)

ft 15 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/21/2015

Sump 35

____ ft 15 inches

Sump 36

____ ft 30 inches

Bay 45

____ ft 30 inches

Bay 48

____ ft 21 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

No

Bioreactor

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

MCC West Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed ?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Lift Stations #2 and #3

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Potential for Off-Site Migration

Aeration Basin (Final Clarifier)

Yes (No)

Primary Clarifier

Yes (No)

High Rate Trickling Filter

Yes (No)

If Yes, has the Project Coordinator been notified?

Yes No (N/A)

Date: 5/21/2015

Issues for Potential Corrective Action

NONE

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 5/21/2015

MCC East Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

_____ ft 24 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Primary Clarifier #1

Yes

No

Primary Clarifier #2

Yes

No

Oxygen Digester #1

Yes

No

Oxygen Digester #2

Yes

No

Oxygen Activated Sludge Tank

Yes

No

Former Sand Filter

Yes

No

Aerobic Digester

Yes

No

Gravity Thickener

Yes

No

Date: 5/21/2015

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

Date: 5/21/2015

Summary of Photographs Taken

Photo File Name = PXXX-05212015 (P#-MMDDYYYY)

NONE

Site Monitoring Explanations

USOR

- NONE

MCC EAST

- NONE

MCC WEST

- NONE

General InformationDay & Date: TUESDAY, 05/26/2015Arrival Time: 07:00Departure Time: 17:30Type of Visit: ✓ Routine Unscheduled

Site Inspection Personnel:

S. SALE (RAMBOLL ENVIRON)L. NGUYEN (RAMBOLL ENVIRON)

Weather Conditions During Site Visit:

PARTLY CLOUDY

Comments (if any):

APPROXIMATELY 4,998 GALLONS WERE REMOVED FROM NORTH TANK FARM,
5,450 GALLONS WERE REMOVED FROM SOUTH TANK FARM, 5,481 GALLONS
WERE REMOVED FROM SUMP 36, AND 9,900 GALLONS WERE REMOVED
FROM MCC EAST LIFT STATION #1 FOR OFF-SITE DISPOSAL AT INTERGULF'S
PASADENA, TEXAS FACILITY. ^{UN} APP RAMBOLL ENVIRON COLLECTED
TWO SAMPLES FROM USOR CONTAINMENT POND.

Weather Forecast and Notable Weather Elements:

General Forecast

NOT AVAILABLE

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 73/85 | 50% | N/A | N/A |
| MONDAY | <input type="checkbox"/> | 73/85 | 30% | N/A | N/A |
| TUESDAY | <input checked="" type="checkbox"/> | 75/87 | 100% | 3.97 IN | N/A |
| WEDNESDAY | <input type="checkbox"/> | 75/88 | 20% | 0.08 IN | N/A |
| THURSDAY | <input type="checkbox"/> | 75/87 | 30% | 0.05 IN | N/A |
| FRIDAY | <input type="checkbox"/> | 76/85 | 30% | 0.10 IN | N/A |
| SATURDAY | <input type="checkbox"/> | 75/85 | 30% | 0.00 IN | N/A |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
<http://www.srh.noaa.gov/hgx/?n=forecasts>

Long Term Outlook

1.50 TO 1.75 INCHES OF RAIN PREDICTED IN THE
AREA OVER THE NEXT 7 DAYS

USOR Property

Site and Perimeter Conditions

(circle one)

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

General Observations

- | | | |
|--|---|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | SEE EXPLANATIONS PAGE → <input type="radio"/> Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

ASTs

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Weeping or Dripping Tanks or Valves? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Leaking or Damaged Containers? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

Roll-Off Boxes

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Tarps Damaged or Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Leaking or Damaged Containers? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |

(Explain all "Yes" answers below)

Freeboard Measurements

| | |
|---------------------------------------|--------------------------|
| North Tank Farm Secondary Containment | _____ ft <u>7</u> inches |
| South Tank Farm Secondary Containment | _____ ft <u>3</u> inches |
| Sump 34 (estimated) | _____ ft <u>3</u> inches |

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 05 / 26 / 2015

Sump 35

 ft 3 inches

Sump 36

ft 23 inches

Bay 45

ft 30 inches

Bay 48

 ft 6 inches

Any freeboard levels < 6 inches from the top of the containment?

☒ Yes

No

If Yes, has the Project Coordinator been notified?

☒ Yes

No

N/A

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

NC

Bioreactor

Yes

Ne

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

ADDRESS STORAGE HOPPER USOR-EQ-07

MCC West Property

Site and Perimeter Conditions

(circle one)

- | | | |
|---|-----------------------------|---------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed ? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Containment Structures Leaking? | Yes | (No) |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | SEE EXPLANATIONS PAGE → Yes | (No) LN |
- (Explain all "Yes" answers below)

General Observations

- | | | |
|--|-----|------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | (No) |
- (Explain all "Yes" answers below)

Lift Stations #2 and #3

- | | | |
|---|-----|------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | (No) |
| <input checked="" type="checkbox"/> Any Caps/Lids Damaged, Missing or Not Closed? | Yes | (No) |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | (No) |
- (Explain all "Yes" answers below)

Potential for Off-Site Migration

- | | | |
|----------------------------------|-----|------|
| Aeration Basin (Final Clarifier) | Yes | (No) |
| Primary Clarifier | Yes | (No) |
| High Rate Trickling Filter | Yes | (No) |

| | | | |
|--|-----|----|-------|
| If Yes, has the Project Coordinator been notified? | Yes | No | (N/A) |
|--|-----|----|-------|

Issues for Potential Corrective Action

NONE

MCC East Property**Site and Perimeter Conditions**

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Containment Structures Leaking?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

Yes

No

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Caps/Lids Damaged, Missing or Not Closed?
- ☒ Have Other Physical Conditions Changed?

Yes

No

Yes

No

Yes

No

(Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

_____ ft 17 inches

Any freeboard levels < 6 inches from the top of the containment?

Yes

No

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Potential for Off-Site Migration

Primary Clarifier #1

Yes

No

Primary Clarifier #2

Yes

No

Oxygen Digester #1

Yes

No

Oxygen Digester #2

Yes

No

Oxygen Activated Sludge Tank

Yes

No

Former Sand Filter

Yes

No

Aerobic Digester

Yes

No

Gravity Thickener

Yes

No

Date: 05/26/2015

If Yes, has the Project Coordinator been notified?

Yes

No

N/A

Issues for Potential Corrective Action

NONE

Date: 05/26/2015

Summary of Photographs Taken

Photo File Name = PXXX-05262015 (P#-MMDDYYYY)

POOL USOR EQ-07 STORAGE HOPPER

P002 " " " "

PO03

POO4 USOR ENTRANCE GATE

Photo Page 1

Site Monitoring Explanations

USOR

- RAMBOLL ENVIRON OBSERVED AN APPARENT SHEEN ON WATER FLOWING DOWN THE DRIVEWAY OF THE USOR PROPERTY. THE SOURCE OF THE SHEEN WAS DETERMINED TO BE A PORTABLE STORAGE HOPPER (EQ-07) NEAR THE SOUTHEAST CORNER OF THE WAREHOUSE THAT APPEARED TO HAVE OVERFLOWED DUE TO HEAVY RAIN IN THE AREA. THE HOPPER HAS A LID, HOWEVER THE LID WAS NOT SITTING PROPERLY ON THE HOPPER. RAMBOLL ENVIRON DEPLOYED BOOMS AND ABSORBENT PADS AROUND THE HOPPER. THE HOPPER LID WAS RE-SEATED ON THE HOPPER, AND THE HOPPER WAS COVERED WITH PLASTIC SHEETING. NO SHEEN FROM THE USOR SITE WAS OBSERVED IN VINCE BAYOU, ALTHOUGH SHEEN WAS OBSERVED ON THE USOR DRIVEWAY. ABSORBENT PADS AND BOOMS WERE DEPLOYED WHERE SHEEN WAS OBSERVED. BOOMS WERE ALSO DEPLOYED INSIDE THE USOR ENTRANCE GATE TO PREVENT FURTHER SHEEN FROM LEAVING THE SITE.

MCC EAST

- NONE

MCC WEST

- HEADWORKS PIPE OBSERVED DRIPPING. NO SHEEN OBSERVED.
LN MCC - HEADWORKS SLUMP OBSERVED OVERFLOWING. NO SHEEN OBSERVED.

Date: 05/28/2015General InformationDay & Date: THURSDAY, 05/28/2015Arrival Time: 07:15Departure Time: 08:45Type of Visit: ☒ Routine ☐ Unscheduled

Site Inspection Personnel:

J. PENNINGTON ^{LN} (RAMBOLL ENVIRON)L. NGUYEN (RAMBOLL ENVIRON)J. PATTERSON (WESTON)

Weather Conditions During Site Visit:

CLEAR SKIES, NO WIND OBSERVED

Comments (if any):

INTERGULF REMOVED APPROXIMATELY 5,000 GALLONS FROM NORTH TANK
FARM, 9,000 GALLONS FROM SOUTH TANK FARM, 24,600 GALLONS
FROM MCC EAST LIFT STATION #1, AND 4,800 GALLONS FROM MCC
WEST AERATION BASIN FOR OFF-SITE DISPOSAL AT INTERGULF'S
PASADENA, TEXAS FACILITY.

Weather Forecast and Notable Weather Elements:

General Forecast

PARTLY CLOUDY WITH A 20 PERCENT CHANCE OF SHOWERS
AND THUNDERSTORMS.

7-Day Forecast at a Glance

| Day | Day of Site Visit | Expected Low/High Temp | Expected Rain Chances | Expected Rain Amount (if known) | Expected Wind Speed and Direction |
|-----------|-------------------------------------|------------------------|-----------------------|---------------------------------|-----------------------------------|
| SUNDAY | <input type="checkbox"/> | 70/84 | 50% | 0.33 IN | N/A |
| MONDAY | <input type="checkbox"/> | 71/85 | 40% | 0.03 IN | N/A |
| TUESDAY | <input type="checkbox"/> | 71/85 | 30% | N/A | N/A |
| WEDNESDAY | <input type="checkbox"/> | 73/85 | 20% | N/A | N/A |
| THURSDAY | <input checked="" type="checkbox"/> | 75/87 | 20% | 0.04 IN | 10-15MPH, SE |
| FRIDAY | <input type="checkbox"/> | 75/85 | 40% | 0.16 IN | 5-10MPH, SE |
| SATURDAY | <input type="checkbox"/> | 73/84 | 40% | 0.12 IN | 5-10MPH, SE |

Source: Tabular State Forecast for Southeast Texas of the National Weather Service for Houston/Galveston Texas
<http://www.srh.noaa.gov/hgx/?n=forecasts>

Long Term Outlook

0.50 TO 0.75 INCHES OF RAIN PREDICTED IN THE AREA
OVER THE NEXT 7 DAYS

USOR Property

Site and Perimeter Conditions

(circle one)

- ☒ Any Locks Missing?
- ☒ Any Gates Damaged, Not Functional or Not Closed?
- ☒ Any Fence Damage Since Previous Site Visit?
- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

General Observations

- ☒ Any Evidence of Staining?
- ☒ Any Change to Existing Stained Areas?
- ☒ Any Evidence of Off-Site Staining?
- ☒ Any Odor Observed Emanating from the Site?

SEE EXPLANATIONS PAGE

Yes (No)
 Yes (No) LN
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

ASTs

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Weeping or Dripping Tanks or Valves?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Drum/Tote Storage Area

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Roll-Off Boxes

- ☒ Any Evidence of Vandalism/Trespassing?
- ☒ Any Tarps Damaged or Missing?
- ☒ Any Leaking or Damaged Containers?
- ☒ Have Other Physical Conditions Changed?

Yes (No)
 Yes (No)
 Yes (No)
 Yes (No)

(Explain all "Yes" answers below)

Freeboard Measurements

North Tank Farm Secondary Containment

ft 12 inches

South Tank Farm Secondary Containment

ft 12 inches

Sump 34 (estimated)

ft 1 inches

USOR-MCC Bi-Weekly Site Monitoring Checklist

Date: 05/28/2015

Sump 35

 ft 1 inches

Sump 36

 ft 20 inches

Bay 45

 ft 30 inches

Bay 48

 ft 7 inches

Any freeboard levels < 6 inches from the top of the containment?

☒ Yes

☒ No LN

If Yes, has the Project Coordinator been notified?

☒ Yes

No

☒ N/A LN

Potential for Off-Site Migration

Containment Pond Freeboard less than 2 feet (estimated)

Yes

☒ No

Bioreactor

Yes

☒ No

If Yes, has the Project Coordinator been notified?

Yes

No

☒ N/A

Issues for Potential Corrective Action

NONE

MCC West Property

Site and Perimeter Conditions

(circle one)

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed ? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Containment Structures Leaking? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? SEE EXPLANATIONS PAGE → | Yes | No |
- (Explain all "Yes" answers below)

General Observations

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Lift Stations #2 and #3

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Caps/Lids Damaged, Missing or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Potential for Off-Site Migration

- | | | |
|----------------------------------|-----|--------------------------|
| Aeration Basin (Final Clarifier) | Yes | <input type="radio"/> No |
| Primary Clarifier | Yes | <input type="radio"/> No |
| High Rate Trickling Filter | Yes | <input type="radio"/> No |

If Yes, has the Project Coordinator been notified? Yes No ☐ N/A

Issues for Potential Corrective Action

TALL VEGETATION TO BE MOWED

MCC East Property**Site and Perimeter Conditions**

(circle one)

- | | | |
|--|-----------------------------|--------------------------|
| <input checked="" type="checkbox"/> Any Locks Missing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Gates Damaged, Not Functional or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Fence Damage Since Previous Site Visit? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Containment Structures Leaking? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | SEE EXPLANATIONS PAGE → Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

General Observations

- | | | |
|--|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Change to Existing Stained Areas? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Evidence of Off-Site Staining? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Odor Observed Emanating from the Site? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Pump Control Room & Lift Station #1

- | | | |
|---|-----|--------------------------|
| <input checked="" type="checkbox"/> Any Evidence of Vandalism/Trespassing? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Any Caps/Lids Damaged, Missing or Not Closed? | Yes | <input type="radio"/> No |
| <input checked="" type="checkbox"/> Have Other Physical Conditions Changed? | Yes | <input type="radio"/> No |
- (Explain all "Yes" answers below)

Freeboard Measurements

Chlorine Contact Tank

_____ ft 18 inches

- | | | |
|--|-----|------------------------------|
| Any freeboard levels < 6 inches from the top of the containment? | Yes | <input type="radio"/> No |
| If Yes, has the Project Coordinator been notified? | Yes | No <input type="radio"/> N/A |

Potential for Off-Site Migration

- | | | |
|------------------------------|-----|--------------------------|
| Primary Clarifier #1 | Yes | <input type="radio"/> No |
| Primary Clarifier #2 | Yes | <input type="radio"/> No |
| Oxygen Digester #1 | Yes | <input type="radio"/> No |
| Oxygen Digester #2 | Yes | <input type="radio"/> No |
| Oxygen Activated Sludge Tank | Yes | <input type="radio"/> No |
| Former Sand Filter | Yes | <input type="radio"/> No |
| Aerobic Digester | Yes | <input type="radio"/> No |
| Gravity Thickener | Yes | <input type="radio"/> No |

Date: 05/28/2015

If Yes, has the Project Coordinator been notified?

Yes

No

~~N/A~~

Issues for Potential Corrective Action

TALL VEGETATION TO BE MOWED

Date: 05/28/2015

Summary of Photographs Taken

Photo File Name = PXXX-05282015 (P#-MMDDYYYY)

POOL MCC EAST VEGETATION

P002

P003 MCC WEST VEGETATION

2004

P005 USOR EQ-D7 STORAGE HOPPER

Page 1

P007

P00B " " "

Photo Page 1

Site Monitoring Explanations

USOR

- EFFECTIVE ENVIRONMENTAL (E2) REMOVED SOME OILY ~~WATER~~^{LN} LIQUID FROM THE OVERFLOWING HOPPER TO PROVIDE APPROXIMATELY 6 INCHES OF FREEBOARD. E2 REPLACED THE LID OF THE HOPPER AND REMOVED OIL FROM THE SIDES OF THE HOPPER WITH ABSORBENT PADS ^{LN} ~~AND TAPED~~. E2 ALSO TAPED A BOOM AROUND THE SIDES OF THE HOPPER TO CATCH ANY ADDITIONAL OIL THAT MAY DRIP AND SECURED POLY SHEETING OVER THE TOP OF THE HOPPER. E2 POWERWASHED THE CONCRETE ADJACENT TO THE ~~OVER~~^{LN} HOPPER, AS WELL AS THE PAVEMENT TO THE EAST OF THE HOPPER AND SOUTH OF THE PARKING LOT. E2 ALSO REMOVED SURFACE SOIL, ROCKS, AND VEGETATION FROM THE AREA LOCATED SOUTH OF THE USOR PARKING LOT THAT APPEARED TO HAVE SOME OIL STAINING.

MCC EAST

- RAMBOLL ENVIRON OBSERVED HIGH VEGETATION ACROSS PROPERTY

MCC WEST

- RAMBOLL ENVIRON OBSERVED HIGH VEGETATION ACROSS PROPERTY

Attachment 2
May 2015 Intergulf Shipping Manifests

| | | | | | | | | |
|---|--|-------------------------------|---|---|--|----------------------------|-----------------|------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert Coleman (405) 286-9198 | 4. Manifest Tracking Number 014509391 JJK | | | |
| 5. Generator's Name and Mailing Address Environ International Corporation ENVIRON International Corporation 10333 Richmond Avenue Ste 910 | | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 400 N. Richway Pasadena, TX 77508 (405) 286-9198 | | | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | U.S. EPA ID Number TXR000031286 | | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TXR000031286 | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | No. | Type | | | | |
| | 1. Non Hazardous Waste Water | | 1 | TT | | G | FS2L | 2191 |
| | 2. | | | | | | | |
| | 3. | | | | | | | |
| | 4. | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG #: 180761 Toucan 865 Toucan 146 | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | |
| Generator's/Offor's Printed/Typed Name ENVIRON INT'L. CORP. | | | Signature Jonathan Ruyk | | | Month Day Year 05 11 15 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year Transporter 2 Printed/Typed Name Signature Month Day Year | | | | | | | | |
| 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. 11081 2. 3. 4. | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name Signature Month Day Year | | | | | | | | |

| | | | | | | | | | | | |
|---|--|---|--|----------------|--|---|------|--|-------------------|-----------------|------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone Robert Cushman (405) 288-8188 | | 4. Manifest Tracking Number 014509390 JJK | | | |
| | | 5. Generator's Name and Mailing Address Environ International Corporation ENVIRON International Corporation 10333 Richmond Avenue Ste 810 Pasadena, TX 77506 (405) 288-8188 | | | | | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (405) 288-8188 | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | U.S. EPA ID Number TXR000031286 | | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4240 | | U.S. EPA ID Number TXR000031286 | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | 1. Non Hazardous Waste Water | | | | No. | Type | 4/600 | G | FSZL | 2191 |
| | | 2. | | | | | | | | | |
| | | 3. | | | | | | | | | |
| | | 4. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG#: LDH 180841 TRK#827 TRL#162 | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Officer's Printed/Typed Name: ENVIRON INTL CORP. Signature: Jonathan Ray C. Month: 05 Day: 11 Year: 15 | | | | | | | | | | | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | | |
| | Transporter signature (for exports only): | | | | | | | | | | |
| DESIGNATED FACILITY | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | |
| | Transporter 1 Printed/Typed Name: Stephen K... Signature: ... Month: 15 Day: 11 Year: 15 | | | | | | | | | | |
| Transporter 2 Printed/Typed Name: ... Signature: ... Month: Day: Year: | | | | | | | | | | | |
| 18. Discrepancy | | | | | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | | | |
| Manifest Reference Number: U.S. EPA ID Number: | | | | | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number: | | | | | | | | | | | |
| Facility's Phone: | | | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month: Day: Year: | | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | |
| 1. H081 2. 3. 4. | | | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | | |
| Printed/Typed Name: Jose Gonzalez Signature: Jose Gonzalez Month: 15 Day: 11 Year: 15 | | | | | | | | | | | |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number | 2. Page 1 of | 3. Emergency Response Phone | 4. Manifest Tracking Number | | | |
|--|--|------------------------|---|-------------------------------------|-----------------------------|-------------------|-----------------|------|
| | | N/A | 1 | Robert E. Cochran (405) 286-9198 | 014509397 JJK | | | |
| 5. Generator's Name and Mailing Address | | | Generator's Site Address (if different than mailing address) | | | | | |
| USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | | |
| 6. Transporter 1 Company Name | | | U.S. EPA ID Number | | | | | |
| Intergulf Corporation | | | TXR000031286 | | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | | |
| | | | | | | | | |
| 8. Designated Facility Name and Site Address | | | U.S. EPA ID Number | | | | | |
| Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | TXR000031286 | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | No. | Type | | | | |
| | 1. Non Hazardous Wastewater-Class II | | 1 | TT | 5000 | G | MCC | 2182 |
| | 2. | | | | | | | |
| | 3. | | | | | | | |
| | 4. | | | | | | | |
| 14. Special Handling Instructions and Additional Information | | | | | | | | |
| IOC Profile Number: 08017 TAUCAH 827 ERG #: Trailer # 154 Load # 180760 | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | |
| Generator's/Officer's Printed/Typed Name | | | Signature | | | Month Day Year | | |
| ENVIRON INT'L CORP. SILVADO AGENT REMOVE AT SITE FOR GROUP | | | [Signature] | | | 05 11 15 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | |
| Transporter 1 Printed/Typed Name | | | Signature | | | Month Day Year | | |
| Edison Hernandez | | | [Signature] | | | 05 11 15 | | |
| Transporter 2 Printed/Typed Name | | | Signature | | | Month Day Year | | |
| | | | | | | | | |
| 18. Discrepancy | | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | |
| Manifest Reference Number: _____ | | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | | |
| Facility's Phone: _____ | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | Month Day Year | | |
| | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | |
| 1. H081 | | 2. | | 3. | | 4. | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | |
| Printed/Typed Name | | | Signature | | | Month Day Year | | |
| Jose Gonzalez | | | [Signature] | | | 05 11 15 | | |

| | | | | | | |
|--|--|---|-------------------|---|--|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert Corbett (405) 286-8198 | 4. Manifest Tracking Number 014509470 JJK | |
| | | 5. Generator's Name and Mailing Address Environ International Corporation ENVIRON International Corporation 400 N. Richey Pasadena, TX 77506 (405) 286-8198 | | | | |
| 6. Transporter 1 Company Name CKG SERVICES LLC | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRF Group 400 N. Richey Pasadena, TX 77506 (405) 286-8198 | | | U.S. EPA ID Number 770000079159 | |
| 7. Transporter 2 Company Name | | | | | U.S. EPA ID Number | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | | | | U.S. EPA ID Number TXR000031286 | |
| Facility's Phone: | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| 1. | Non Hazardous Waste Water | 1 | TT | 5,500 | G | F52L 2101 |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG#: | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Offertor's Printed/Typed Name: ENVIRON INT'L CORP. Signature: Jonathan R. Riehl Month: 05 Day: 13 Year: 15 AGENT ON BEHALF OF THE U.S. OIL RECOVERY SITE PRF GROUP | | | | | | |
| 16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: KEUW KAMMURUWA Signature: Month: 05 Day: 13 Year: 15 Transporter 2 Printed/Typed Name: Signature: Month: Day: Year: | | | | | | |
| 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number: Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month: Day: Year: | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H081 2. 3. 4. | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a Printed/Typed Name: Jose Gonzalez Signature: Jose Gonzalez Month: 05 Day: 13 Year: 15 | | | | | | |

| | | | | | | |
|--|--|---|----------------|--|--|----------------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert Cushman (409) 286-8198 | 4. Manifest Tracking Number 014509480 JJK | |
| | | 5. Generator's Name and Mailing Address Environ International Corporation ENVIRON International Corporation 10333 Richmond Avenue Ste 810 Pasadena, TX 77506 (409) 286-8198 | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (409) 286-8198 | | |
| 6. Transporter 1 Company Name CKG Services LLC | | U.S. EPA ID Number TXR000031286 | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TXR000031286 | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| 1. | Non Hazardous Waste Water | 1 TT | | 5,500 | G | F82L 2181 |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG #: | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name ENVIRON INT'L CORP. SIGNATORY AGENT ON BEHALF OF THE U.S. OIL RECOVERY SITE PRP GROUP | | | | Signature Jonathan Penz | | Month Day Year 05 18 15 |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____ | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name KEVIN KRAMER Signature Month Day Year 05 14 15 Transporter 2 Printed/Typed Name 9 B Signature Month Day Year | | | | | | |
| 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H081 2. 3. 4. | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Jose Gonzalez Signature Month Day Year 05 14 15 | | | | | | |

T# D-273

| | | | | | |
|---|--|-------------------------------|--|--|---|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Cochran (405) 288-9198 | 4. Manifest Tracking Number 014509467 JJK |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | |
| 6. Transporter 1 Company Name ENSOURCE CORP | | | U.S. EPA ID Number TXR000021410 | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | | U.S. EPA ID Number TXR000031286 | | |
| 9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers | | 11. Total Quantity |
| | | | No. | Type | 12. Unit Wt./Vol. |
| 1. Non Hazardous Wastewater-Class II | | | 1 | TT | 3,000 |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |
| 13. Waste Codes MCC 2102 | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG 2: | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | |
| Generator's/Offor's Printed/Typed Name ENVIRON INT'L CORP. Signature Jonathan Perry Month 05 Day 13 Year 15 | | | | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | |
| Transporter 1 Printed/Typed Name ES HICKS Signature ES Hicks Month 05 Day 13 Year 15 | | | Transporter 2 Printed/Typed Name Signature Month Day Year | | |
| 18. Discrepancy | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | |
| 18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number | | | | | |
| Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | |
| 1. H081 | | 2. | | 3. | |
| 4. | | 5. | | 6. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | |
| Printed/Typed Name Jose Gonzalez Signature Jose Gonzalez Month 05 Day 14 Year 15 | | | | | |

| | | | | | | | | | |
|--|---|---|--|--|----------------------------|--|--------------------|---|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone Robert E. Conner (202) 335-6100 | | 4. Manifest Tracking Number 014508468 JJK | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | |
| 6. Transporter 1 Company Name ENSOURCE CORP | | 8226 Warren Rd Houston, TX 77041 | | U.S. EPA ID Number TXR000021910 | | | | | |
| 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4218 | | | | U.S. EPA ID Number TXR0000031286 | | | | | |
| Facility's Phone: | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | 1. | Non Hazardous Wastewater-Class II | | | 1 11 | | 3000 | G | MCC1 2102 |
| | 2. | | | | | | | | |
| | 3. | | | | | | | | |
| | 4. | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name ENVIRON INT'L CORP Signature Jonathan Perry Month 5 Day 14 Year 15 | | | | | | | | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | |
| Transporter 1 Printed/Typed Name BACK CORP Signature Back Corp Month 5 Day 14 Year 15 | | | | | | | | | |
| Transporter 2 Printed/Typed Name Signature Month Day Year | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | |
| | 18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number | | | | | | | | |
| | Facility's Phone: | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | |
| 1. H001 2. 3. 4. | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | |
| Printed/Typed Name Jose Gonzalez Signature Jose Gonzalez Month 5 Day 14 Year 15 | | | | | | | | | |

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|---|--|--|-------------------|--|---|--------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Lottman (405) 286-9198 | 4. Manifest Tracking Number 014509469 JJK | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | |
| Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | 6. Transporter 1 Company Name CKG SERVICES LLC | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number TXR000079159 | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | U.S. EPA ID Number TXR000031288 | | | | |
| Facility's Phone: | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers | | 11. Total Quantity |
| | | | | No. | Type | 12. Unit Wt./Vol. |
| | 1. Non Hazardous Wastewater-Class II | | | 1 | TT | 3,000 |
| | 2. | | | | | |
| | 3. | | | | | |
| | 4. | | | | | |
| 13. Waste Codes MCC 2192 | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number : 06017 ERG #: | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offeror's Printed/Typed Name: <u>Robert E. Lottman</u> Signature: <u>[Signature]</u> Month: <u>5</u> Day: <u>14</u> Year: <u>15</u> | | | | | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name: <u>Shawn Crothers</u> Signature: <u>[Signature]</u> Month: <u>5</u> Day: <u>14</u> Year: <u>15</u> | | | | Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ | | |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| 18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number: _____ | | | | | | |
| Facility's Phone: _____ | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____ | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. <u>H081</u> | | 2. _____ | | 3. _____ | | 4. _____ |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | |
| Printed/Typed Name: <u>Jose Gonzalez</u> Signature: <u>[Signature]</u> Month: <u>5</u> Day: <u>14</u> Year: <u>15</u> | | | | | | |

T# D-273

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

| | | | | | | | |
|--|---|--|---|--|--|-------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Cochran (405) 286-9198 | 4. Manifest Tracking Number 014509465 JJK | | |
| 5. Generator's Name and Mailing Address * USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | |
| 6. Transporter 1 Company Name Ensource Corp | | | U.S. EPA ID Number TXR000021910 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TXR000001286 | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | 1. | Non Hazardous Wastewater-Class II | 1 | TT | 3,000 | G | MCC1 2182 |
| | 2. | | | | | | |
| | 3. | | | | | | |
| | 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Officer's Printed/Typed Name: RAYMOND LITTLE CORP. SIGNATORY AGENT ON BEHALF OF THE U.S. OIL RECOVERY SITE OPERATING GROUP Signature: Jonathan Ray Little Month: 05 Day: 14 Year: 15 | | | | | | | |
| TRANSPORTER INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Curtis Smith Signature: Curtis Smith Month: 5 Day: 14 Year: 15 | | | | | | |
| | Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ | | | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____ Facility's Phone: _____ | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month: _____ Day: _____ Year: _____ | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H001 2. 3. 4. | | | | | | |
| | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: Jose Gonzalez Signature: Jose Gonzalez Month: 5 Day: 14 Year: 15 | | | | | | |

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|--|--|--|----------------------------|---|--|-------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Coffman (405) 335-6100 | 4. Manifest Tracking Number 014509466 JJK | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | |
| 6. Transporter 1 Company Name C.K.G. Services LLC | | U.S. EPA ID Number TXR000079159 | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TXR000031286 | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. |
| | 1. | Non Hazardous Wastewater-Class II | 1 | TT | 5,500 | G |
| | 2. | | | | | |
| | 3. | | | | | |
| | 4. | | | | | |
| 13. Waste Codes MCO1 2182 | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 08017 ERG#: | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name: ENVIRON INT'L CORP. Signature: Jonathan Ruzick Month: 05 Day: 14 Year: 15 | | | | | | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | |
| | Transporter signature (for exports only): | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | |
| DESIGNATED FACILITY | Transporter 1 Printed/Typed Name: Kevin Karamanlian Signature: Month: 05 Day: 11 Year: 15 | | | | | |
| | Transporter 2 Printed/Typed Name: Signature: Month: Day: Year: | | | | | |
| | 18. Discrepancy | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number: | | | | | | |
| Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month: Day: Year: | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. H081 | | 2. | | 3. | | 4. |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | |
| Printed/Typed Name: Jose Gonzalez Signature: Jose Gonzalez Month: 15 Day: 14 Year: 15 | | | | | | |

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|--|---|--|--|----------------|----------------|---|--------------------|---|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | 4. Manifest Tracking Number 014509459 JJK | | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | |
| 6. Transporter 1 Company Name CKG Services LLC | | U.S. EPA ID Number TXR000079159 | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4310 | | U.S. EPA ID Number TXR000031286 | | | | | | | | |
| Facility's Phone: | | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | | | No. | Type | | | | |
| | 1. | Non Hazardous Wastewater-Class II | | | 1 | TT | 5,000 | G | MCCC 2192 | |
| | 2. | | | | | | | | | |
| | 3. | | | | 400 | | | | | |
| | 4. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG#: | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name: ENVIRON INT'L CORP SIGNATORY AGENT ENVIRON INT'L CORP OIL RECOVERY SITE WASTE 20% U.S. Signature: Jonathan Remy Month: 05 Day: 14 Year: 15 | | | | | | | | | | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____ | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | |
| | Transporter 1 Printed/Typed Name: SHAW-CROOKHOUSE Signature: Shaw-Crookhouse Month: 05 Day: 14 Year: 15 | | | | | | | | | |
| Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ | | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | |
| | Manifest Reference Number: _____ | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ | | | | | | | | | |
| | Facility's Phone: _____ | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____ | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | |
| 1. 11081 2. 3. 4. | | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | |
| Printed/Typed Name: Trudy Maggosa Signature: Trudy Maggosa Month: 05 Day: 14 Year: 15 | | | | | | | | | | |

Shipping Manifest
Intergulf Corporation
P.O. Box 1590 • La Porte, Texas 77572

No 83012

Telephone: (281) 474-4210

Fax: (281) 474-4226

GENERATOR:

(*All Generator Information Must Be Complete)

Facility Name: US Oil Recovery Site PRP Group Profile # (required) 00156

Facility Address: 400 N. Richey, Pasadena, TX 77506

Emergency Contact: Andrew Brower Phone #: (210) 317-2298

Material Classification (per Material Characterization Form): _____

or proper shipping name (per 49 CFR 172) Oil Water for Recycle

Quantity in Gallons: 3123

Emergency Contact (210) 317-2298

I certify that the material being transferred on this shipment is not a hazardous waste as defined in 40 CFR Part 261, nor does it contain any PCB's or halogenated solvents.

Signature: Jonathan Perry

(Generators Representative)

Title: ASSOCIATE

Date: 05/14/15

Environ Int'l. Corp.
Signatory Agent on Behalf of the U.S. Oil
Recovery Site PRP Group

TRANSPORTER:

Company Name: Intergulf Corporation

Phone #: (281) 474-4210 Truck #: 810 / 168

EPA I.D. #: TXR000031286 State I.D. #: 39068

Drivers Name: Reginald Howard DOT #: 921807

Signature: [Signature] Date: 5/14/15

RECEIVING FACILITY:

Name: Intergulf Corporation

Address: 10020 Bayport Blvd.

Pasadena, TX 77507

(281) 474-4210

EPA ID # TXR000031286

TCEQ # A85860 - Used Oil or

TCEQ # 39068 - Solid Waste

Intergulf Corporation Job # 181214

Facility Operators Name: _____

Signature: _____ Date: _____

| | | | | | | | | | | |
|--|--|--|--|----------------|----------------------------|---|--------------------|---|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone Robert E. Coffman (405) 288-9198 | | 4. Manifest Tracking Number 014509463 JJK | | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | | |
| 6. Transporter 1 Company Name INTERGULF CORPORATION | | U.S. EPA ID Number TXR000031286 | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4219 | | U.S. EPA ID Number TXR000031286 | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | 1. | Non Hazardous Wastewater-Class II | | | 1 TT | | 5450 | G | MCC1 2102 | |
| | 2. | | | | | | | | | |
| | 3. | | | | | | | | | |
| | 4. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: TRK-816 TRL-142 #181623 | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name: ENVIRON WASTE CORP. Signature: Jonathan Rye Month: 5 Day: 18 Year: 15 | | | | | | | | | | |
| TRANSPORTER INTL | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: WILLIAM B. NEEMS JR. Signature: William B. Neems Month: 5 Day: 18 Year: 15 Transporter 2 Printed/Typed Name: N/A Signature: Month: Day: Year: | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: U.S. EPA ID Number: | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) Facility's Phone: U.S. EPA ID Number: | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month: Day: Year: | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H081 2. 3. 4. | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18g Printed/Typed Name: Touhy Maggard Signature: Touhy Maggard Month: 5 Day: 18 Year: 15 | | | | | | | | | | |

| | | | | | | | | | | |
|---|--|--|----------------|--|--|------------------------------------|--------------------|------------------|-----------------|------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Pasadena, TX 77506 (405) 286-9198 | 4. Manifest Tracking Number 014509464 JJK | | | | | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | | | | | |
| Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | | | U.S. EPA ID Number TXR000031286 | | | | |
| 6. Transporter 1 Company Name Inter Gulf Corp. | | | | | | U.S. EPA ID Number | | | | |
| 7. Transporter 2 Company Name | | | | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77607 (281) 474-4218 | | | | | | U.S. EPA ID Number TXR000031286 | | | | |
| Facility's Phone: | | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers | | 11. Total Quantity | 12. Unit WL/Vol. | 13. Waste Codes | |
| | | 1. Non Hazardous Wastewater-Class II | | | No. | Type | | | | |
| | | | | | 1 | TT | 5,000 | G | MCC1 | 2192 |
| | | 2. | | | | | | | | |
| | | 3. | | | | | | | | |
| | 4. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IOC Profile Number: 08017 ERG #: LD* 181622 TRK* 814 TRL* 150 | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | |
| Generator's/Officer's Printed/Typed Name: ENVIRON INT'L CORP. Signature: Jonathan Ray Month: 05 Day: 18 Year: 15 | | | | | | | | | | |
| TRANSPORTER INTL | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Willie Ray Land Jr. Signature: Willie Ray Land Jr. Month: 05 Day: 18 Year: 15 Transporter 2 Printed/Typed Name: Signature: Month: Day: Year: | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | | | |
| | Facility's Phone: | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) Month: Day: Year: | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H081 2. 3. 4. | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a. Printed/Typed Name: Tracy Maggard Signature: Tracy Maggard Month: 05 Day: 18 Year: 15 | | | | | | | | | | |

| | | | | | | |
|--|--------|--|--|--|---|-------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TX4000051540 | 2. Page 1 of 1 | 3. Emergency Response Phone (405) 288-9198 | 4. Manifest Tracking Number 012164398 JJK | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | |
| 6. Transporter 1 Company Name Interquif Corporation | | | U.S. EPA ID Number TXR000031266 | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Interquif Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (817) 474-4210 | | | U.S. EPA ID Number TXR000031266 | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. |
| | | | No. | Type | | |
| | | Non Hazardous Wastewater-Class II | 1 | TT | 5000 G | MCC1 2182 |
| | 2. | | | | | |
| | 3. | | | | | |
| | 4. | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG# : 822 154 181621 | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name ENVIRON INT'L CORP SIGNATORY AGENT ON BEHALF OF THE U.S. ON REMEDIATION SITE PAP GROUP | | | Signature <i>Jonathan Perry</i> | | Month 5 | Day 18 |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. | | | Port of entry/exit: Date leaving U.S.: | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name Adrian Hernandez | | | Signature <i>Adrian Hernandez</i> | | Month 5 | Day 18 |
| Transporter 2 Printed/Typed Name | | | Signature | | Month | Day |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | |
| Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. H1081 | | 2. | | 3. | | 4. |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18b | | | | | | |
| Printed/Typed Name Trudy Maggard | | | Signature <i>Trudy Maggard</i> | | Month 5 | Day 18 |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Houston, TX (405) 286-9198 | 4. Manifest Tracking Number 014509461 JJK | |
|--|--|---|-------------------|--|--|-----------------|
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186 | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186 | | | | |
| 6. Transporter 1 Company Name | | U.S. EPA ID Number | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TXR000031286 | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit WL/Vol. | 13. Waste Codes |
| 1. | Non Hazardous Wastewater-Class II | 1 | TT | 4.05 | G | MCC1 2192 |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: <i>Trace H. Per Hazard 196 Hazard 11047</i> | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name <i>Thomas H. Per</i> | | Signature <i>Thomas H. Per</i> | | Month 5 | Day 21 | Year 15 |
| 16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____ | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name <i>Intergulf Bayport</i> | | Signature <i>[Signature]</i> | | Month 5 | Day 21 | Year 15 |
| Transporter 2 Printed/Typed Name | | Signature | | Month | Day | Year |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: _____ | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | |
| Facility's Phone: _____ | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. | 2. | 3. | 4. | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | |
| Printed/Typed Name | | Signature | | Month | Day | Year |

| | | | | | | | | | | |
|--|---|--|--|-------------------------------|----------------|--|--------------------|---|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone Robert E. Coleman (405) 286-9198 | | 4. Manifest Tracking Number 014509462 JJK | | |
| | | 5. Generator's Name and Mailing Address <div style="display: flex; justify-content: space-between;"> <div> USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 </div> <div> USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 </div> </div> | | | | | | | | |
| 6. Transporter 1 Company Name | | U.S. EPA ID Number | | 7. Transporter 2 Company Name | | U.S. EPA ID Number | | 8. Designated Facility Name and Site Address | | |
| | | | | | | | | Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | |
| | | | | | | | | TXR000031286 | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | | | No. | Type | | | | |
| | 1. | Non Hazardous Wastewater-Class II | | | 1 | TT | 4829 | G | MCC 2192 | |
| | 2. | | | | | | | | | |
| | 3. | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information | | | | | | | | | | |
| IGC Profile Number: 08017 ERG #: TRK # 824 TRK # 152 LOAD # 181846 | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | |
| Generator's/Officer's Printed/Typed Name ENVIRON Int'l. Inc. Signature Jonathan Perry Month 10 Day 21 Year 15 | | | | | | | | | | |
| INTL | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name HENRY SPIVEY Signature [Signature] Month 15 Day 12 Year 15 Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ | | | | | | | | | |
| TRANSPORTER | 18. Discrepancy | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | |
| | Manifest Reference Number: _____ | | | | | | | | | |
| | 19b. Alternate Facility (or Generator) U.S. EPA ID Number _____ | | | | | | | | | |
| DESIGNATED FACILITY | Facility's Phone: _____ | | | | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____ | | | | | | | | | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | |
| | 1. _____ 2. _____ 3. _____ 4. _____ | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | |
| Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____ | | | | | | | | | | |

| | | | | | | | |
|---|---|--|---|---|---|---------------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TX4000051540 | 2. Page 1 of 1 | 3. Emergency Response Phone (405) 730-8198 | 4. Manifest Tracking Number 012164396 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | |
| 6. Transporter 1 Company Name ENTER ROLL (C.F. HARTMAN) | | | U.S. EPA ID Number TXR000031286 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TXR000031286 | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Wastewater-Class II | 1 | IT | 49127 | G | WCC1 2192 |
| | 2. | | | | | | |
| | 3. | | | | | | |
| | 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IBC Profile Number: 08017 Tiller 818 Tm 156 Lm 156206 | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offor's Printed/Typed Name | | | Signature | | | Month Day Year 5 24 15 | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Kene Gunkan Signature: Date: 5 26 15 Transporter 2 Printed/Typed Name: Signature: Month Day Year | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: | | | | | | |
| | 18b. Alternate Facility (or Generator) | | | | | U.S. EPA ID Number | |
| | Facility's Phone: | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) | | | | | Month Day Year | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | |
| Printed/Typed Name | | | Signature | | | Month Day Year | |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TX0000014540 | 2. Page 1 of 1 | 3. Emergency Response Phone (409) 286-8198 | 4. Manifest Tracking Number 009471220 JJK | | |
|--|--|--|--|---|--|---------------------------|-----------------|
| 5. Generator's Name and Mailing Address US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (409) 286-8198 | | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (409) 286-8198 | | | | |
| 6. Generator's Phone: | | | U.S. EPA ID Number | | | | |
| 7. Transporter 1 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Lufkin Gulf Bayport 10020 Bayport Blvd Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TX0000012946 | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | 1. Non Hazardous Waste Water | | 1 11 | | 4998 | 0 | 201 2101 |
| | 2. | | | | | | |
| | 3. | | | | | | |
| | 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number 05143 ERG # Truck # 818 Trailer # 156 License # 181908 | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offeror's Printed/Typed Name James L. Brown | | | | Signature James L. Brown | | Month Day Year 5 26 15 | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | |
| Transporter 1 Printed/Typed Name Kene Williams | | | | Signature Kene Williams | | Month Day Year 5 26 15 | |
| Transporter 2 Printed/Typed Name | | | | Signature | | Month Day Year | |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | |
| Printed/Typed Name | | | | Signature | | Month Day Year | |

| | | | | | | | |
|--|--|---------------------------------------|--|--|--|-------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TXR00001540 | 2. Page 1 of 1 | 3. Emergency Response Phone PACIFIC 911 (405) 260 9118 | 4. Manifest Tracking Number 009471222 JJK | | |
| 5. Generator's Name and Mailing Address US Oil Recovery Site PRP Group 406 N. Richey Pasadena, TX 77506 (405) 260 0118 | | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 406 N. Richey Pasadena, TX 77506 (405) 260 9118 | | | | |
| 6. Transporter 1 Company Name INTERGULF CORPORATION | | | U.S. EPA ID Number TXR000031286 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena Texas 77507 Facility's Phone: (281) 474 4210 | | | U.S. EPA ID Number TXR000231286 | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | 1. High Hazardous Waste Water | | 1 | IT | 5450 | 0 | 252, 101 |
| | 2. | | | | | | |
| | 3. | | | | | | |
| 4. | | | | | | | |
| 14. Special Handling Instructions and Additional Information IDC Profile Number 05143 ERG # TRK-216 TRK-142 #181909 | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name: Signature: Month Day Year | | | | | | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Signature: Month Day Year Transporter 2 Printed/Typed Name: Signature: Month Day Year | | | | | | | |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: Signature: Month Day Year | | | | | | | |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TX4000051540 | 2. Page 1 of 1 | 3. Emergency Response Phone (405) 286-8186 | 4. Manifest Tracking Number 012164397 JJK | |
|--|--|--|---|---|--|-----------------|
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-0186 | | | |
| 6. Transporter 1 Company Name WILLARD B. NELSON JR. | | | U.S. EPA ID Number TXR000031286 | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Interquil Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TXR000031286 | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | Non Hazardous Wastewater-Class II | 1 17 | | 5000 | G | MCC1 2182 |
| | 2. | | | | | |
| | 3. | | | | | |
| | 4. | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: TRK - 816 TRI - 143 #182265 | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name | | Signature | | Month Day Year | | |
| WILLARD B. NELSON JR. | | [Signature] | | 5 21 85 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name | | Signature | | Month Day Year | | |
| WILLARD B. NELSON JR. | | [Signature] | | 5 21 85 | | |
| Transporter 2 Printed/Typed Name | | Signature | | Month Day Year | | |
| | | | | | | |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | |
| Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. | | 2. | | 3. | | 4. |
| | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | |
| Printed/Typed Name | | Signature | | Month Day Year | | |
| | | | | | | |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TXR000051540 | 2. Page 1 of 1 | 3. Emergency Response Phone No. (405) 288-9198 | 4. Manifest Tracking Number 012161007 JJK | |
|--|--|--|----------------|---|--|-----------------|
| 5. Generator's Name and Mailing Address US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (405) 288-9198 | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (405) 288-9198 | | | | |
| Generator's Phone: | | | | | | |
| 6. Transporter 1 Company Name SUNBELT CORP | | U.S. EPA ID Number TXR00001410 | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | U.S. EPA ID Number TXR000031288 | | | | |
| Facility's Phone: | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| 1. | Non Hazardous Waste Water | 1 | T | 5.7 | | 3 FSP1 2161 |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG #: | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offor's Printed/Typed Name | | Signature | | | Month | Day Year |
| | | | | | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name | | Signature | | | Month | Day Year |
| | | | | | | |
| Transporter 2 Printed/Typed Name | | Signature | | | Month | Day Year |
| | | | | | | |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | |
| Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | |
| | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. | | 2. | | 3. | | 4. |
| | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | |
| Printed/Typed Name | | Signature | | | Month | Day Year |
| | | | | | | |

| | | | | | | | | | | | |
|--|---|---|--|--------------|--|-----------------------------|--|-----------------------------|-------------------|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number | | 2. Page 1 of | | 3. Emergency Response Phone | | 4. Manifest Tracking Number | | | |
| | | | | | | | | 009471192 JJK | | | |
| 5. Generator's Name and Mailing Address: 400 N. Polk Pasadena, TX 77506 (805) 285-1118 Generator's Phone: | | Generator's Site Address (if different than mailing address): 3001 Polk Pasadena, TX 77506 (805) 285-1118 | | | | | | | | | |
| | | | | | | | | | | | |
| 6. Transporter 1 Company Name | | U.S. EPA ID Number | | | | | | | | | |
| | | | | | | | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | | | | | |
| | | | | | | | | | | | |
| 8. Designated Facility Name and Site Address: 10000 Pasadena Blvd Pasadena, Texas 77507 (811) 474-4211 Facility's Phone: | | U.S. EPA ID Number | | | | | | | | | |
| | | | | | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) 1. UN Hazardous Waste | | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | 2. | | | | | | | | | | |
| | 3. | | | | | | | | | | |
| | 4. | | | | | | | | | | |
| | | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information ICC Profile Number 05142 ERG # | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name: Signature: Month Day Year | | | | | | | | | | | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | |
| | Transporter 1 Printed/Typed Name: Signature: Month Day Year | | | | | | | | | | |
| | Transporter 2 Printed/Typed Name: Signature: Month Day Year | | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | | |
| | Manifest Reference Number: | | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | | | | |
| | Facility's Phone: | | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | |
| 1. | | 2. | | 3. | | 4. | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | | | | | |
| Printed/Typed Name: Signature: Month Day Year | | | | | | | | | | | |

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|--|---|--|--------------------------|--|---|----------------------------------|----------------------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone (405) 266-6198 | 4. Manifest Tracking Number 014508741 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 266-9198 | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 266-6198 | | | |
| 6. Transporter 1 Company Name ... | | | | U.S. EPA ID Number ... | | | |
| 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 19020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | | | U.S. EPA ID Number TXR000631286 | | | |
| Facility's Phone: | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Wastewater-Class II | 1 | IT | 2.5 | G | MCC1 2192 |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number : 06017 ERG # : | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offor's Printed/Typed Name ... | | | | Signature ... | | Month Day Year 5 27 15 | |
| TRANSPORTER INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| | Transporter 1 Printed/Typed Name | | | | Signature ... | | Month Day Year 5 27 15 |
| | Transporter 2 Printed/Typed Name | | | | Signature | | Month Day Year |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| | Manifest Reference Number: | | | | | | |
| | 18b. Alternate Facility (or Generator) | | | | U.S. EPA ID Number | | |
| | Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | Month Day Year | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | |
| Printed/Typed Name | | | | Signature | | Month Day Year | |

| | | | | | | | |
|--|--|-------------------------------|---|--|---|----|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone PRAXAIR Corporation (281) 245-6100 | 4. Manifest Tracking Number 014508743 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9188 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9188 | | | | |
| 6. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport Blvd Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TXR000031286 | | | | |
| 7. Transporter 1 Company Name Inter Gulf Corporation | | | U.S. EPA ID Number TXR000031286 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 9a. HM | | | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) Non Hazardous Wastewater-Class II | | 10. Containers No. Type 1 TT | | |
| | | | | | 11. Total Quantity 500 | | |
| | | | | | 12. Unit Wt./Vol. G | | |
| | | | | | 13. Waste Codes N001 2182 | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Officer's Printed/Typed Name Carmen M. ... | | | Signature Carmen M. ... | | Month Day Year 5 28 15 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | |
| Transporter 1 Printed/Typed Name Thomas Tipton | | | Signature Thomas Tipton | | Month Day Year 5 28 15 | | |
| Transporter 2 Printed/Typed Name | | | Signature | | Month Day Year | | |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | Month Day Year | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | |
| Printed/Typed Name | | | Signature | | Month Day Year | | |

| | | | | | | | | | |
|---|--|---|--|--|--|---|-------------------|---|-----------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone ROBERT COMPANY (405) 286-9198 | | 4. Manifest Tracking Number 014508742 JJK | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | | |
| 6. Transporter 1 Company Name Inter Gulf Bayport | | U.S. EPA ID Number TX R000031286 | | 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TX R000031286 | | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | 1. Non Hazardous Wastewater-Class II | | | 1 | | IT | 3,000 | G | MCC1 2192 |
| | 2. | | | | | | | | |
| | 3. | | | | | | | | |
| | 4. | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: 18.2: A3 3.2 1.8 | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | |
| Generator's/Officer's Printed/Typed Name Robert Company | | | | Signature <i>[Signature]</i> | | Month 08 | | Day 15 | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | |
| Transporter 1 Printed/Typed Name Inter Gulf Bayport | | | | Signature <i>[Signature]</i> | | Month 08 | | Day 15 | |
| Transporter 2 Printed/Typed Name | | | | Signature | | Month | | Day | |
| 18. Discrepancy | | | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | |
| Manifest Reference Number: _____ | | | | | | | | | |
| 18b. Alternate Facility (or Generator): _____ U.S. EPA ID Number _____ | | | | | | | | | |
| Facility's Phone: _____ | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | | | Month 08 | |
| | | | | | | | | Day 15 | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | |
| 1. | | 2. | | 3. | | 4. | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | |
| Printed/Typed Name | | | | Signature | | Month 08 | | Day 15 | |
| | | | | | | | | | |

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|--|--|--------------------------------------|--|---|---|-------------------|-----------------|-----------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Cotton (405) 288-9198 | 4. Manifest Tracking Number 014508202 JJK | | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9198 | | | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | U.S. EPA ID Number TX/R000031286 | | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4218 | | | U.S. EPA ID Number TX/R000031286 | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | | | No. | Type | | | | |
| | 1. Non Hazardous Wastewater-Class II | | 1 | TT | 4 | 6 | NOG1 2182 | |
| | 2. | | | | | | | |
| | 3. | | | | | | | |
| 4. | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG#1 | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | |
| Generator's/Offor's Printed/Typed Name | | | Signature | | | Month | Day | Year |
| W. J. Cotton | | | Robert E. Cotton | | | 05 | 30 | 15 |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | |
| Transporter 1 Printed/Typed Name | | | Signature | | | Month | Day | Year |
| W. J. Cotton | | | Robert E. Cotton | | | 05 | 30 | 15 |
| Transporter 2 Printed/Typed Name | | | Signature | | | Month | Day | Year |
| | | | | | | | | |
| 18. Discrepancy | | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | |
| Manifest Reference Number: | | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number: | | | | | | | | |
| Facility's Phone: | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | Month | Day | Year |
| | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | |
| 1. | | 2. | | 3. | | 4. | | |
| | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | | |
| Printed/Typed Name | | | Signature | | | Month | Day | Year |
| | | | | | | | | |

| | | | | | | | |
|--|--|-------------------------------|---|--|--|----------------------------|-----------------|
| UNIFORM HAZARDOUS WASTE TEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Coffman (214) 392-6100 | 4. Manifest Tracking Number 014508800 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 8 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 8 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | U.S. EPA ID Number TXR000031288 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 | | | U.S. EPA ID Number TXR000031288 | | | | |
| Facility's Phone: (214) 474-4210 | | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | 1. Non Hazardous Wastewater-Class II | | 1 1T | | 4700 | G | MCC1 2192 |
| | 2. | | | | | | |
| | 3. | | | | | | |
| | 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG# 1.6/11.1 | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offeror's Printed/Typed Name Robert E. Coffman | | | Signature [Signature] | | | Month Day Year 05 29 15 | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | |
| Transporter 1 Printed/Typed Name [Signature] | | | Signature [Signature] | | | Month Day Year 05 29 15 | |
| Transporter 2 Printed/Typed Name | | | Signature | | | Month Day Year | |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | |
| Printed/Typed Name | | | Signature | | | Month Day Year | |

| | | | | | | | | | | | |
|---|--|---|--|--|--|--|--|---|---|---|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number <div style="text-align: center;">N/A</div> | | 2. Page 1 of <div style="text-align: center;">1</div> | | 3. Emergency Response Phone <div style="text-align: center;">800-424-9311</div> | | 4. Manifest Tracking Number <div style="text-align: center; font-size: 1.5em;">014508799 JJK</div> | | | |
| | | 5. Generator's Name and Mailing Address <div style="text-align: center;">USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186</div> | | | | Generator's Site Address (if different than mailing address) <div style="text-align: center;">USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186</div> | | | | | |
| GENERATOR | | 6. Transporter 1 Company Name <div style="text-align: center;">Inter Gulf Corporation</div> | | | | U.S. EPA ID Number <div style="text-align: center;">TXR000031286</div> | | | | | |
| | | 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | | | |
| DESIGNATED FACILITY | | 8. Designated Facility Name and Site Address <div style="text-align: center;">Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 281-474-4210</div> | | | | U.S. EPA ID Number <div style="text-align: center;">TXR000031286</div> | | | | | |
| | | Facility's Phone: | | | | | | | | | |
| TRANSPORTER | | 9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) <div style="text-align: center;">Non-Hazardous Wastewater-Class II</div> | | | | 10. Containers | | 11. Total Quantity <div style="text-align: center;">4700</div> | 12. Unit Wt./Vol. <div style="text-align: center;">G</div> | 13. Waste Codes <div style="text-align: center;">MCC1 2192</div> | |
| | | | | | | No. Type | | | | | |
| | | 1. <div style="text-align: center;">1 IT</div> | | | | | | | | | |
| | | 2. | | | | | | | | | |
| | | 3. | | | | | | | | | |
| INTL | | 4. | | | | | | | | | |
| | | | | | | | | | | | |
| TRANSPORTER | | 14. Special Handling Instructions and Additional Information <div style="text-align: center;">IGC Profile Number: 06017 ERG #: 336 1101</div> | | | | | | | | | |
| | | 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | |
| TRANSPORTER | | Generator's/Offor's Printed/Typed Name <div style="text-align: center;">Jonathan Perry</div> | | | | Signature <div style="text-align: center;">Jonathan Perry</div> | | Month Day Year <div style="text-align: center;">05/28/15</div> | | | |
| | | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. | | | | Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | |
| TRANSPORTER | | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | |
| | | Transporter 1 Printed/Typed Name <div style="text-align: center;">Freddie Swig</div> | | | | Signature <div style="text-align: center;">Freddie Swig</div> | | Month Day Year <div style="text-align: center;">05/28/15</div> | | | |
| TRANSPORTER | | Transporter 2 Printed/Typed Name | | | | Signature | | Month Day Year | | | |
| | | | | | | | | | | | |
| DESIGNATED FACILITY | | 18. Discrepancy | | | | | | | | | |
| | | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | |
| DESIGNATED FACILITY | | 18b. Alternate Facility (or Generator) | | | | U.S. EPA ID Number | | | | | |
| | | Facility's Phone: | | | | | | | | | |
| DESIGNATED FACILITY | | 18c. Signature of Alternate Facility (or Generator) | | | | Month Day Year | | | | | |
| | | | | | | | | | | | |
| DESIGNATED FACILITY | | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | |
| | | 1. | | 2. | | 3. | | 4. | | | |
| DESIGNATED FACILITY | | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | | | |
| | | Printed/Typed Name | | | | Signature | | Month Day Year | | | |
| DESIGNATED FACILITY | | | | | | | | | | | |
| | | | | | | | | | | | |

| | | | | | | | | |
|--|--|--------------------------------------|--|--|---|----------------------------------|-------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone 800-368-5710 | 4. Manifest Tracking Number 014508801 JJK | | | |
| 5. Generator Name and Mailing Address USEPA Region 5 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186 | | | Generator's Site Address (if different than mailing address) USEPA Region 5 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186 | | | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | U.S. EPA ID Number TXR000031286 | | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | | U.S. EPA ID Number TXR000031286 | | | | | |
| 9a. HM | | | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | 10. Containers No. Type | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | Non Hazardous Wastewater-Class II | | 3 TT | 4.25 | G MCGI 2102 | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 00017 ERG: 1.3 | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | |
| Generator's/Officer's Printed/Typed Name X M. J. ... | | | Signature X M. J. ... | | | Month Day Year 5 10 15 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | |
| Transporter 1 Printed/Typed Name Intergulf Corporation | | | Signature Intergulf Corporation | | | Month Day Year 5 12 15 | | |
| Transporter 2 Printed/Typed Name | | | Signature | | | Month Day Year | | |
| 18. Discrepancy | | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | |
| Manifest Reference Number: U.S. EPA ID Number | | | | | | | | |
| 18b. Alternate Facility (or Generator) | | | | | | | | |
| Facility's Phone: | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | |
| 1. 2. 3. 4. | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | | |
| Printed/Typed Name | | | Signature | | | Month Day Year | | |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number TXR000051340 | 2. Page 1 of | 3. Emergency Response Phone 1-800-424-9333 | 4. Manifest Tracking Number 009470053 JJK | | |
|--|--|---|--------------|---|--|-----------------|------------|
| 5. Generator's Name and Mailing Address ENVIRON International Corporation 10333 Richmond Avenue Ste 810 | | Generator's Site Address (if different than mailing address) 400 N. Ridgely Pasadena, TX 77506 (405) 286-9198 | | | | | |
| Generator's Phone: | | | | | | | |
| 6. Transporter 1 Company Name Inter Gulf Corporation | | U.S. EPA ID Number 31286 | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | U.S. EPA ID Number TXR000031286 | | | | | |
| Facility's Phone: | | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 14. Special Handling Instructions and Additional Information K&C Phone Number: 06143 ERG#: | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offor's Printed/Typed Name James H. Bannett | | Signature J. H. Bannett | | | Month 8 | Day 28 | Year 15 |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. | | Port of entry/exit: Date leaving U.S.: | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | |
| Transporter 1 Printed/Typed Name Eric T. M. | | Signature | | | Month | Day | Year |
| Transporter 2 Printed/Typed Name | | Signature | | | Month | Day | Year |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | |
| Printed/Typed Name | | Signature | | | Month | Day | Year |

| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number 10000000000000000000 | 2. Page 1 of 1 | 3. Emergency Response Phone (405) 286-6198 | 4. Manifest Tracking Number 009471219 JJK | |
|--|--|---|----------------|---|--|-----------------|
| 5. Generator's Name and Mailing Address US Oil Recovery Site (PYP Group) 400 N. Richey Pasadena TX 77506 (405) 286-9198 | | Generator's Site Address (if different than mailing address) US Oil Recovery Site (PYP Group) 400 N. Richey Pasadena TX 77506 (405) 286-9198 | | | | |
| 6. Transporter 1 Company Name INTERGULF CORPORATION | | U.S. EPA ID Number TXR000031286 | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport Blvd Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TXR000031286 | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | No. | Type | | | |
| | Non Hazardous Waste Water | 1 | TL | 6,200 | 0 | 52L, 3191 |
| | 2. | | | | | |
| | 3. | | | | | |
| 4. | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number 05143 ERG # 2002-153259 830-9-20 | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | |
| Generator's/Offoror's Printed/Typed Name L. J. JONES | | Signature L. J. JONES | | | Month 5 | Day 15 |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| Transporter 1 Printed/Typed Name L. J. JONES | | Signature L. J. JONES | | | Month 5 | Day 15 |
| Transporter 2 Printed/Typed Name | | Signature | | | Month | Day |
| 18. Discrepancy | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | |
| Facility's Phone: | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month Day Year | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| 1. | | 2. | | 3. | | 4. |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | |
| Printed/Typed Name | | Signature | | | Month | Day |

| | | | | | | | |
|--|---|--|--------------------------|--|---|----------------------------------|----------------------------------|
| FORM HAZARDOUS MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone ROBERT L. GIBSON (405) 296-5100 | 4. Manifest Tracking Number 014508831 JJK | | |
| 5. Generator's Name and Mailing Address Environ International Corporation ENVIRON International Corporation 10333 Richmond Avenue Ste 910 Pasadena, TX 77506 (405) 296-5100 | | | | Generator's Site Address (if different than mailing address) US O9 Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (405) 296-5100 | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | | U.S. EPA ID Number TXRG00031288 | | | |
| 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 | | | | U.S. EPA ID Number TXRG00031288 | | | |
| Facility's Phone: (281) 424-4240 | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Waste Water | 1 | FT | 5174 | G | F521 2091 |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number : 05143 ERG #: 836/161 | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Officer's Printed/Typed Name Robert L. Gibson | | | | Signature <i>Robert L. Gibson</i> | | Month Day Year 12 2 12 | |
| TRANSPORTER INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| | Transporter 1 Printed/Typed Name Intergulf Corporation | | | | Signature <i>Intergulf Corporation</i> | | Month Day Year 12 2 12 |
| DESIGNATED FACILITY | Transporter 2 Printed/Typed Name | | | | Signature | | Month Day Year |
| | 18. Discrepancy | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| | Manifest Reference Number: _____ | | | | | | |
| 18b. Alternate Facility (or Generator) | | | | | | U.S. EPA ID Number | |
| Facility's Phone: _____ | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | Month Day Year | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | |
| Printed/Typed Name | | | | Signature | | Month Day Year | |

DESIGNATED FACILITY →

Please

(Form designed for use on elite

typewriter.)

Form Approved. OMB No. 2050-0039

| | | | | | | | | | | | |
|--|---|--|--|---|----------------------------|---|--------------------|--|-----------------|--|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone 214-288-9198 | | 4. Manifest Tracking Number 014508829 JJK | | | |
| 5. Generator's Name and Mailing Address - Environ-Information Corporation - ENVIRON-Information Corporation 19333 Richmond Ave., Ste 910 Pasadena, TX 77508 Generator's Phone: (405) 288-9198 | | | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 100 N. Richey Pasadena, TX 77508 (405) 288-9198 | | | | | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | | U.S. EPA ID Number TXR000031286 | | | | | | | |
| 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Skypac 10020 Bayport Blvd Pasadena, Texas 77507 Facility's Phone: (405) 288-9198 | | | | U.S. EPA ID Number TXR000031286 | | | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | 10. Containers No. Type | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | | |
| | 1 | Non-Hazardous Waste Water | | | 1 IT | | 5723 | G | PS2L 2(S) | | |
| | 2 | | | | | | | | | | |
| | 3 | | | | | | | | | | |
| | 4 | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG #: | | | | | | | | | | | |
| 15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | |
| Generator's/Officer's Printed/Typed Name: [Signature] Signature: [Signature] Month: 05 Day: 29 Year: 15 | | | | | | | | | | | |
| TRANSPORTER INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | | | | | |
| | Transporter signature (for exports only): | | | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | | |
| Transporter 1 Printed/Typed Name: Signature: Month: Day: Year: | | | | | | | | | | | |
| Transporter 2 Printed/Typed Name: Signature: Month: Day: Year: | | | | | | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | | |
| | Manifest Reference Number: U.S. EPA ID Number: | | | | | | | | | | |
| | 18b. Alternate Facility (or Generator) Facility's Phone: Month: Day: Year: | | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month: Day: Year: | | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | |
| 1. 2. 3. 4. | | | | | | | | | | | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | | | | | |
| Printed/Typed Name: Signature: Month: Day: Year: | | | | | | | | | | | |

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|--|---|--|---|---|--|--------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Corbin 714.963.6100 | 4. Manifest Tracking Number 014508832 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9188 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-8188 | | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | U.S. EPA ID Number TXR000031283 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | U.S. EPA ID Number TXR000031285 | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Wastewater-Class II | 1 | TT | 4,300 | G | MCC1 2182 |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Officer's Printed/Typed Name: <i>Robert E. Corbin</i> Signature: <i>Robert E. Corbin</i> Month: 05 Day: 29 Year: 15 | | | | | | | |
| INT'L | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| TRANSPORTER | Transporter 1 Printed/Typed Name: <i>DWIGHT TRAKL</i> Signature: <i>DWIGHT TRAKL</i> Month: Day: Year: | | | | | | |
| | Transporter 2 Printed/Typed Name: Signature: Month: Day: Year: | | | | | | |
| DESIGNATED FACILITY | 18. Discrepancy | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| | Manifest Reference Number: | | | | | | |
| | 18b. Alternate Facility (or Generator) | | | | | U.S. EPA ID Number | |
| | Facility's Phone: | | | | | | |
| | 18c. Signature of Alternate Facility (or Generator) | | | | | Month: Day: Year: | |
| | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | |
| | 1. | 2. | 3. | 4. | | | |
| | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | |
| | Printed/Typed Name: Signature: Month: Day: Year: | | | | | | |

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|---|--------|--|-------------------|---|---|-------------------|-----------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone ROBERT E. COFFMAN (405) 288-9188 | 4. Manifest Tracking Number 014508835 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9188 | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 288-9188 | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | | | U.S. EPA ID Number TXR000031286 | | | |
| 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | | U.S. EPA ID Number TXR000031286 | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Wastewater-Class II | 1 | T | 5,000 | G | MCC1 2192 |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: <i>Transported per 49 CFR 173.133, 173.134, 173.135, 173.136, 173.137, 173.138, 173.139, 173.140, 173.141, 173.142, 173.143, 173.144, 173.145, 173.146, 173.147, 173.148, 173.149, 173.150, 173.151, 173.152, 173.153, 173.154, 173.155, 173.156, 173.157, 173.158, 173.159, 173.160, 173.161, 173.162, 173.163, 173.164, 173.165, 173.166, 173.167, 173.168, 173.169, 173.170, 173.171, 173.172, 173.173, 173.174, 173.175, 173.176, 173.177, 173.178, 173.179, 173.180, 173.181, 173.182, 173.183, 173.184, 173.185, 173.186, 173.187, 173.188, 173.189, 173.190, 173.191, 173.192, 173.193, 173.194, 173.195, 173.196, 173.197, 173.198, 173.199, 173.200, 173.201, 173.202, 173.203, 173.204, 173.205, 173.206, 173.207, 173.208, 173.209, 173.210, 173.211, 173.212, 173.213, 173.214, 173.215, 173.216, 173.217, 173.218, 173.219, 173.220, 173.221, 173.222, 173.223, 173.224, 173.225, 173.226, 173.227, 173.228, 173.229, 173.230, 173.231, 173.232, 173.233, 173.234, 173.235, 173.236, 173.237, 173.238, 173.239, 173.240, 173.241, 173.242, 173.243, 173.244, 173.245, 173.246, 173.247, 173.248, 173.249, 173.250, 173.251, 173.252, 173.253, 173.254, 173.255, 173.256, 173.257, 173.258, 173.259, 173.260, 173.261, 173.262, 173.263, 173.264, 173.265, 173.266, 173.267, 173.268, 173.269, 173.270, 173.271, 173.272, 173.273, 173.274, 173.275, 173.276, 173.277, 173.278, 173.279, 173.280, 173.281, 173.282, 173.283, 173.284, 173.285, 173.286, 173.287, 173.288, 173.289, 173.290, 173.291, 173.292, 173.293, 173.294, 173.295, 173.296, 173.297, 173.298, 173.299, 173.300, 173.301, 173.302, 173.303, 173.304, 173.305, 173.306, 173.307, 173.308, 173.309, 173.310, 173.311, 173.312, 173.313, 173.314, 173.315, 173.316, 173.317, 173.318, 173.319, 173.320, 173.321, 173.322, 173.323, 173.324, 173.325, 173.326, 173.327, 173.328, 173.329, 173.330, 173.331, 173.332, 173.333, 173.334, 173.335, 173.336, 173.337, 173.338, 173.339, 173.340, 173.341, 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173.786, 173.787, 173.788, 173.789, 173.790, 173.791, 173.792, 173.793, 173.794, 173.795, 173.796, 173.797, 173.798, 173.799, 173.800, 173.801, 173.802, 173.803, 173.804, 173.805, 173.806, 173.807, 173.808, 173.809, 173.810, 173.811, 173.812, 173.813, 173.814, 173.815, 173.816, 173.817, 173.818, 173.819, 173.820, 173.821, 173.822, 173.823, 173.824, 173.825, 173.826, 173.827, 173.828, 173.829, 173.830, 173.831, 173.832, 173.833, 173.834, 173.835, 173.836, 173.837, 173.838, 173.839, 173.840, 173.841, 173.842, 173.843, 173.844, 173.845, 173.846, 173.847, 173.848, 173.849, 173.850, 173.851, 173.852, 173.853, 173.854, 173.855, 173.856, 173.857, 173.858, 173.859, 173.860, 173.861, 173.862, 173.863, 173.864, 173.865, 173.866, 173.867, 173.868, 173.869, 173.870, 173.871, 173.872, 173.873, 173.874, 173.875, 173.876, 173.877, 173.878, 173.879, 173.880, 173.881, 173.882, 173.883, 173.884, 173.885, 173.886, 173.887, 173.888, 173.889, 173.890, 173.891, 173.892, 173.893, 173.894, 173.895, 173.896, 173.897, 173.898, 173.899, 173.900, 173.901, 173.902, 173.903, 173.904, 173.905, 173.906, 173.907, 173.908, 173.909, 173.910, 173.911, 173.912, 173.913, 173.914, 173.915, 173.916, 173.917, 173.918, 173.919, 173.920, 173.921, 173.922, 173.923, 173.924, 173.925, 173.926, 173.927, 173.928, 173.929, 173.930, 173.931, 173.932, 173.933, 173.934, 173.935, 173.936, 173.937, 173.938, 173.939, 173.940, 173.941, 173.942, 173.943, 173.944, 173.945, 173.946, 173.947, 173.948, 173.949, 173.950, 173.951, 173.952, 173.953, 173.954, 173.955, 173.956, 173.957, 173.958, 173.959, 173.960, 173.961, 173.962, 173.963, 173.964, 173.965, 173.966, 173.967, 173.968, 173.969, 173.970, 173.971, 173.972, 173.973, 173.974, 173.975, 173.976, 173.977, 173.978, 173.979, 173.980, 173.981, 173.982, 173.983, 173.984, 173.985, 173.986, 173.987, 173.988, 173.989, 173.990, 173.991, 173.992, 173.993, 173.994, 173.995, 173.996, 173.997, 173.998, 173.999, 174.000, 174.001, 174.002, 174.003, 174.004, 174.005, 174.006, 174.007, 174.008, 174.009, 174.010, 174.011, 174.012, 174.013, 174.014, 174.015, 174.016, 174.017, 174.018, 174.019, 174.020, 174.021, 174.022, 174.023, 174.024, 174.025, 174.026, 174.027, 174.028, 174.029, 174.030, 174.031, 174.032, 174.033, 174.034, 174.035, 174.036, 174.037, 174.038, 174.039, 174.040, 174.041, 174.042, 174.043, 174.044, 174.045, 174.046, 174.047, 174.048, 174.049, 174.050, 174.051, 174.052, 174.053, 174.054, 174.055, 174.056, 174.057, 174.058, 174.059, 174.060, 174.061, 174.062, 174.063, 174.064, 174.065, 174.066, 174.067, 174.068, 174.069, 174.070, 174.071, 174.072, 174.073, 174.074, 174.075, 174.076, 174.077, 174.078, 174.079, 174.080, 174.081, 174.082, 174.083, 174.084, 174.085, 174.086, 174.087, 174.088, 174.089, 174.090, 174.091, 174.092, 174.093, 174.094, 174.095, 174.096, 174.097, 174.098, 174.099, 174.100, 174.101, 174.102, 174.103, 174.104, 174.105, 174.106, 174.107, 174.108, 174.109, 174.110, 174.111, 174.112, 174.113, 174.114, 174.115, 174.116, 174.117, 174.118, 174.119, 174.120, 174.121, 174.122, 174.123, 174.124, 174.125, 174.126, 174.127, 174.128, 174.129, 174.130, 174.131, 174.132, 174.133, 174.134, 174.135, 174.136, 174.137, 174.138, 174.139, 174.140, 174.141, 174.142, 174.143, 174.144, 174.145, 174.146, 174.147, 174.148, 174.149, 174.150, 174.151, 174.152, 174.153, 174.154, 174.155, 174.156, 174.157, 174.158, 174.159, 174.160, 174.161, 174.162, 174.163, 174.164, 174.165, 174.166, 174.167, 174.168, 174.169, 174.170, 174.171, 174.172, 174.173, 174.174, 174.175, 174.176, 174.177, 174.178, 174.179, 174.180, 174.181, 174.182, 174.183, 174.184, 174.185, 174.186, 174.187, 174.188, 174.189, 174.190, 174.191, 174.192, 174.193, 174.194, 174.195, 174.196, 174.197, 174.198, 174.199, 174.200, 174.201, 174.202, 174.203, 174.204, 174.205, 174.206, 174.207, 174.208, 174.209, 174.210, 174.211, 174.212, 174.213, 174.214, 174.215, 174.216, 174.217, 174.218, 174.219, 174.220, 174.221, 174.222, 174.223, 174.224, 174.225, 174.226, 174.227, 174.228, 174.229, 174.230, 174.231, 174.232, 174.233, 174.234, 174.235, 174.236, 174.237, 174.238, 174.239, 174.240, 174.241, 174.242, 174.243, 174.244, 174.245, 174.246, 174.247, 174.248, 174.249, 174.250, 174.251, 174.252, 174.253, 174.254, 174.255, 174.256, 174.257, 174.258, 174.259, 174.260, 174.261, 174.262, 174.263, 174.264, 174.265, 174.266, 174.267, 174.268, 174.269, 174.270, 174.271, 174.272, 174.273, 174.274, 174.275, 174.276, 174.277, 174.278, 174.279, 174.280, 174.281, 174.282, 174.283, 174.284, 174.285, 174.286, 174.287, 174.288, 174.289, 174.290, 174.291, 174.292, 174.293, 174.294, 174.295, 174.296, 174.297, 174.298, 174.299, 174.300, 174.301, 174.302, 174.303, 174.304, 174.305, 174.306, 174.307, 174.308, 174.309, 174.310, 174.311, 174.312, 174.313, 174.314, 174.315, 174.316, 174.317, 174.318, 174.319, 174.320, 174.321, 174.322, 174.323, 174.324, 174.325, 174.326, 174.327, 174.328, 174.329, 174.330, 174.331, 174.332, 174.333, 174.334, 174.335, 174.336, 174.337, 174.338, 174.339, 174.340, 174.341, 174.342, 174.343, 174.344, 174.345, 174.346, 174.347, 174.348, 174.349, 174.350, 174.351, 174.352, 174.353, 174.354, 174.355, 174.356, 174.357, 174.358, 174.359, 174.360, 174.361, 174.362, 174.363, 174.364, 174.365, 174.366, 174.367, 174.368, 174.369, 174.370, 174.371, 174.372, 174.373, 174.374, 174.375, 174.376, 174.377, 174.378, 174.379, 174.380, 174.381, 174.382, 174.383, 174.384, 174.385, 174.386, 174.387, 17</i> | | | | | | | |

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|---|---|---|---|---|---|-------------------|-------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert Coleman (405) 266-9198 | 4. Manifest Tracking Number 014508330 JJK | | |
| | | 5. Generator's Name and Mailing Address Environ International Corporation ENVIRON International Corporation 10333 Richmond Avenue Ste 810 Pasadena, TX 77506 (405) 266-9198 | | Generator's Site Address (if different than mailing address) US Oil Recovery Site PRP Group 400 N. Richey Pasadena, TX 77506 (405) 266-9198 | | | |
| 6. Transporter 1 Company Name Intergulf Corporation | | U.S. EPA ID Number TXR0000031288 | | | | | |
| 7. Transporter 2 Company Name | | U.S. EPA ID Number | | | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TXR0000031288 | | | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Waste Water | 1 | TT | 77507 | 6 | FS2L 2101 |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 05143 ERG #: 8361161 | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offor's Printed/Typed Name Robert Coleman | | Signature <i>Robert Coleman</i> | | Month 05 | | Day 30 | Year 15 |
| TRANSPORTER INTL | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. | | Port of entry/exit: | | Date leaving U.S.: | | |
| | Transporter signature (for exports only): | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| DESIGNATED FACILITY | Transporter 1 Printed/Typed Name Intergulf Corporation | | Signature <i>Intergulf Corporation</i> | | Month 5 | | Day 30 |
| | Transporter 2 Printed/Typed Name | | Signature | | Month | | Day |
| | | | | | | | |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | Month | Day |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | |
| Printed/Typed Name Robert Coleman | | Signature <i>Robert Coleman</i> | | Month 05 | | Day 30 | Year 15 |

| | | | | | | | |
|--|--|--------------------------------------|--|--|---|-----------------|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone 800-424-6115 | 4. Manifest Tracking Number 014508739 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | |
| 6. Transporter 1 Company Name Interstate Company | | | U.S. EPA ID Number TX600003136 | | | | |
| 7. Transporter 2 Company Name | | | U.S. EPA ID Number | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 (281) 474-4210 | | | U.S. EPA ID Number TXRC00031286 | | | | |
| Facility's Phone: | | | | | | | |
| 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers No. | Type | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes | |
| | Non Hazardous Wastewater-Class II | 1 | IT | 5000 | G MCC | 2192 | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number : 06017 ERG # : | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Officer's Printed/Typed Name Jonathan Perry | | | Signature <i>Jonathan Perry</i> | | Month Day Year 05 29 15 | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____ | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | |
| Transporter 1 Printed/Typed Name Interstate | | | Signature <i>Interstate</i> | | Month Day Year 5 29 15 | | |
| Transporter 2 Printed/Typed Name | | | Signature | | Month Day Year | | |
| 18. Discrepancy | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | |
| Manifest Reference Number: _____ | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: _____ | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | Month Day Year | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | |
| Printed/Typed Name | | | Signature | | Month Day Year | | |

**Shipping Manifest
Intergulf Corporation**

P.O. Box 1590 • La Porte, Texas 77572

78159

Telephone: (281) 474-4210

Fax: (281) 474-4226

GENERATOR: (*All Generator Information Must Be Complete)

Facility Name: US EPA REGION 6 US OIL RECOVERY. Profile # (required) ~~05171~~ 06156

Facility Address: 400 N RICHEY, PASADENA, TX 77506

Emergency Contact: Ed Robert Coffman Phone #: 409-464-~~7539~~ 7539

Material Classification (per Material Characterization Form): _____

or proper shipping name (per 49 CFR 172) Oil Water for Recycle

409-464-7539
Emergency Contact ~~(713) 588-4338~~ JP

Quantity in Gallons: 2,500 Gallons

I certify that the material being transferred on this shipment is not a hazardous waste as defined in 40 CFR Part 261, nor does it contain any PCB's or halogenated solvents.

Signature: AL B...
(Generators Representatives)

Title: CONSULTANT
Date: 05/29/15

EDWARDS INTERNATIONAL CORP.
SIGNATURES FILED ON BEHALF OF US OIL
RECOVERY PRP GROUP

TRANSPORTER:

Company Name: Intergulf Corporation 1175 Bayport Blvd

Phone #: (281) 474-4210 409-464-1113 Truck #: 2016 1113

EPA I.D. #: TXR000031286 State I.D. #: 39068 87-44

Drivers Name: Paul Perry DOT #: TXR000031286 1662368

Signature: [Signature] Date: 5/29/15

RECEIVING FACILITY:

Name: **Intergulf Corporation**

Address: **10020 Bayport Blvd.**

Pasadena, TX 77507

(281) 474-4210

EPA ID # TXR000031286

TCEQ # A85860 – Used Oil or

TCEQ # 39068 – Solid Waste

Intergulf Corporation Job # _____

Facility Operators Name: _____

Signature: _____ Date: _____

| | | | | | | | | | | | | | |
|---|--|--|--|-------------------|--|--|--|---|--|-------------------|--|-----------------|--|
| UNIFG. *HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | | 2. Page 1 of 1 | | 3. Emergency Response Phone Robert E. Lottman (405) 286-9198 | | 4. Manifest Tracking Number 014508833 JJK | | | | | |
| | | 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9198 | | | | | |
| 6. Transporter 1 Company Name Inter Gulf Corporation | | U.S. EPA ID Number TXR000031286 | | | | | | | | | | | |
| | | 7. Transporter 2 Company Name U.S. EPA ID Number | | | | | | | | | | | |
| 8. Designated Facility Name and Site Address Inter Gulf Bayport 10020 Bayport BLVD Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | U.S. EPA ID Number TXR000031286 | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 9a. HM | | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | | | | 10. Containers | | 11. Total Quantity | | 12. Unit Wt./Vol. | | 13. Waste Codes | |
| | | | | | | No. Type | | | | | | | |
| | | Non Hazardous Wastewater-Class II | | | | 1 1T | | 4 | | G | | MCC1 2192 | |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG # 111 Incident # 95175-02787111 | | | | | | | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.37(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | | | | | | | |
| Generator's/Offor's Printed/Typed Name: <i>Robert E. Lottman</i> Signature: <i>[Signature]</i> Month: <i>05</i> Day: <i>20</i> Year: <i>15</i> | | | | | | | | | | | | | |
| 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: <i>[Signature]</i> Date leaving U.S.: <i>[Signature]</i> | | | | | | | | | | | | | |
| 17. Transporter Acknowledgment of Receipt of Materials | | | | | | | | | | | | | |
| Transporter 1 Printed/Typed Name: <i>Inter Gulf</i> Signature: <i>[Signature]</i> Month: <i>05</i> Day: <i>21</i> Year: <i>15</i> | | | | | | | | | | | | | |
| Transporter 2 Printed/Typed Name: <i>[Signature]</i> Month: <i>[]</i> Day: <i>[]</i> Year: <i>[]</i> | | | | | | | | | | | | | |
| 18. Discrepancy | | | | | | | | | | | | | |
| 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | | | | | | | | |
| Manifest Reference Number: <i>[]</i> | | | | | | | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number: <i>[]</i> | | | | | | | | | | | | | |
| Facility's Phone: <i>[]</i> | | | | | | | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) Month: <i>[]</i> Day: <i>[]</i> Year: <i>[]</i> | | | | | | | | | | | | | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | | | | | | | |
| 1. | | | | 2. | | | | 3. | | | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a | | | | | | | | | | | | | |
| Printed/Typed Name: <i>[]</i> Signature: <i>[]</i> Month: <i>[]</i> Day: <i>[]</i> Year: <i>[]</i> | | | | | | | | | | | | | |

| | | | | | | | |
|---|---|--|----------------|--|---|-----------------------------------|-----------------------------------|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator ID Number N/A | 2. Page 1 of 1 | 3. Emergency Response Phone Robert E. Cornman (405) 286-6103 | 4. Manifest Tracking Number 014508744 JJK | | |
| 5. Generator's Name and Mailing Address USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186 | | | | Generator's Site Address (if different than mailing address) USEPA Region 6 US Oil Recovery 400 N Richey Pasadena, TX 77506 (405) 286-9186 | | | |
| 6. Transporter 1 Company Name UTS, Inc. Tel (714) 766-1886 | | | | U.S. EPA ID Number TXR000063907 | | | |
| 7. Transporter 2 Company Name | | | | U.S. EPA ID Number | | | |
| 8. Designated Facility Name and Site Address Intergulf Bayport 10020 Bayport Blvd Pasadena, Texas 77507 Facility's Phone: (281) 474-4210 | | | | U.S. EPA ID Number TXR000031286 | | | |
| GENERATOR | 9a. HM | 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) | 10. Containers | | 11. Total Quantity | 12. Unit Wt./Vol. | 13. Waste Codes |
| | | | No. | Type | | | |
| | | Non Hazardous Wastewater-Class II | 1 | T | 5,000 | G | MCC1 2182 |
| | | | | | | | |
| | | | | | | | |
| 14. Special Handling Instructions and Additional Information IGC Profile Number: 06017 ERG #: | | | | | | | |
| 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. | | | | | | | |
| Generator's/Offoror's Printed/Typed Name EXXON INT'L CO. CORP. | | | | Signature <i>[Signature]</i> | | Month Day Year 15 12 15 | |
| TRANSPORTER | 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.: | | | | | | |
| | 17. Transporter Acknowledgment of Receipt of Materials | | | | | | |
| | Transporter 1 Printed/Typed Name Pamela Soldner | | | | Signature <i>[Signature]</i> | | Month Day Year 15 12 15 |
| DESIGNATED FACILITY | Transporter 2 Printed/Typed Name | | | | | | |
| | Signature | | | | | | |
| | Month Day Year | | | | | | |
| | 18. Discrepancy | | | | | | |
| | 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection | | | | | | |
| Manifest Reference Number: | | | | | | | |
| 18b. Alternate Facility (or Generator) U.S. EPA ID Number | | | | | | | |
| Facility's Phone: | | | | | | | |
| 18c. Signature of Alternate Facility (or Generator) | | | | | | Month Day Year | |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) | | | | | | | |
| 1. | | 2. | | 3. | | 4. | |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a | | | | | | | |
| Printed/Typed Name | | | | Signature | | Month Day Year | |

Attachment 3
Analytical and Validation Reports – Containment Pond Samples

**Laboratory Data Review
Site Monitoring and Stabilization
Former US Oil Recovery/MCC Recycling Site
Pasadena, Texas**

Laboratory SDG (Sample Delivery Group): HS15051167

Reviewer: Kristin Drucquer

Date Reviewed: June 8, 2015

This data validation report has been prepared by Ramboll Environ US Corporation (Ramboll Environ – formerly ENVIRON International Corporation) to assess the validity and usability of laboratory analytical data for samples collected from the Containment Pond located on the USOR property at the Former US Oil Recovery/MCC Recycling Site in Pasadena, Texas.

The analytical data were evaluated for quality assurance and quality control (QA/QC) based on the following documents: *Quality Assurance Project Plan (QAPP) Site Monitoring and Stabilization, Former US Oil Recovery/MCC Recycling Site (March 2012)*, *USEPA Contract Laboratory Program National Functional Guidelines for Superfund Organic Methods Data Review (June 2008)*, *USEPA Contract Laboratory Program National Functional Guidelines for Inorganic Superfund Data Review (January 2010)* and *Test Methods for Evaluating Solid Waste, Physical/Chemical Methods: SW-846 On-line* updated July 27, 2011. The analyses for oil & grease, COD, dissolved oxygen, and pH were performed at ALS Environmental (ALS) in Holland, Michigan. The analysis for cyanide was performed by DHL Analytical in Round Rock, Texas.

Table I: Sample Cross Reference

| Field ID | Sample Type | Lab ID | Matrix | Analyses | | | | |
|-------------------|-------------|---------------|--------|--------------|-----|------------------|----|---------------------|
| | | | | Oil & Grease | COD | Dissolved Oxygen | pH | Cyanide (low-level) |
| USOR-CP-03-150526 | SA | HS15051167-01 | Water | X | X | X | X | X |
| USOR-CP-04-150526 | SA | HS15051167-02 | Water | X | X | X | X | X |

Notes: Chemical o
SA = Sample

The laboratory SDG HS150501167 report was reviewed using QA/QC evaluation of the data according to precision, accuracy, representativeness, completeness and comparability relative to the project data quality objectives. All quality control recoveries were within established laboratory control limits with one exception. The pH analysis was performed outside the method hold time of "immediate" for all samples. The results are considered estimated values.

It is the opinion of this reviewer that all data is valid and considered usable.



10450 Stancliff Rd. Suite 210
Houston, TX 77099
T: +1 281 530 5656
F: +1 281 530 5887
www.alsglobal.com

June 02, 2015

Robert Coffman
Environ International Corporation
10333 Richmond Avenue
Suite 910
Houston, TX 77042

Work Order: **HS15051167**

Laboratory Results for: **USOR 31-25867P**

Dear Robert,

ALS Environmental received 2 sample(s) on May 26, 2015 for the analysis presented in the following report.

The analytical data provided relates directly to the samples received by ALS Environmental and for only the analyses requested. Results are expressed as "as received" unless otherwise noted.

QC sample results for this data met EPA or laboratory specifications except as noted in the Case Narrative or as noted with qualifiers in the QC batch information. Should this laboratory report need to be reproduced, it should be reproduced in full unless written approval has been obtained by ALS Environmental. Samples will be disposed in 30 days unless storage arrangements are made.

If you have any questions regarding this report, please feel free to call me.

Sincerely,

A handwritten signature in cursive script that reads "Sonia West".

Generated By: Jumoke.Lawal
Sonia West
Project Manager

Client: Environ International Corporation
Project: USOR 31-25867P
Work Order: HS15051167

SAMPLE SUMMARY

| Lab Samp ID | Client Sample ID | Matrix | TagNo | Collection Date | Date Received | Hold |
|---------------|-------------------|--------|-------|-------------------|-------------------|--------------------------|
| HS15051167-01 | USOR-CP-03-150526 | Water | | 26-May-2015 10:30 | 26-May-2015 17:00 | <input type="checkbox"/> |
| HS15051167-02 | USOR-CP-04-150526 | Water | | 26-May-2015 14:05 | 26-May-2015 17:00 | <input type="checkbox"/> |

Client: Environ International Corporation

CASE NARRATIVE

Project: USOR 31-25867P

Work Order: HS15051167

Work Order Comments

- The analyses for Oil & Grease, COD, Dissolved Oxygen, and pH were subcontracted to ALS Environmental in Holland, MI.

The analyses for Cyanide were subcontracted to DHL Analytical in Roundrock, TX.

Client: Environ International Corporation
Project: USOR 31-25867P
Sample ID: USOR-CP-03-150526
Collection Date: 26-May-2015 10:30

ANALYTICAL REPORT

WorkOrder:HS15051167
Lab ID:HS15051167-01
Matrix:Water

| ANALYSES | RESULT | QUAL | REPORT LIMIT | UNITS | DILUTION FACTOR | DATE ANALYZED |
|------------------------|--------------|------|-----------------|-------|--------------------|-------------------|
| Method:NA | | | | | | Analyst: SUB |
| Miscellaneous Analysis | See Attached | | | | 1 | 02-Jun-2015 11:37 |
| SUB_O&G_1664 Method:NA | | | | | | Analyst: SUB |
| Subcontract Analysis | See Attached | | | | 1 | 02-Jun-2015 11:37 |

Note: See Qualifiers Page for a list of qualifiers and their explanation.

Client: Environ International Corporation
Project: USOR 31-25867P
Sample ID: USOR-CP-04-150526
Collection Date: 26-May-2015 14:05

ANALYTICAL REPORT

WorkOrder:HS15051167
Lab ID:HS15051167-02
Matrix:Water

| ANALYSES | RESULT | QUAL | REPORT LIMIT | UNITS | DILUTION FACTOR | DATE ANALYZED |
|------------------------|--------------|------|-----------------|-------|--------------------|-------------------|
| Method:NA | | | | | | Analyst: SUB |
| Miscellaneous Analysis | See Attached | | | | 1 | 02-Jun-2015 11:37 |
| SUB_O&G_1664 Method:NA | | | | | | Analyst: SUB |
| Subcontract Analysis | See Attached | | | | 1 | 02-Jun-2015 11:37 |

Note: See Qualifiers Page for a list of qualifiers and their explanation.

Client: Environ International Corporation
Project: USOR 31-25867P
WorkOrder: HS15051167

DATES REPORT

| Sample ID | Client Samp ID | Collection Date | TCLP Date | Prep Date | Analysis Date | DF |
|-------------------------|---------------------------------|-------------------|----------------------|-----------|-------------------|----|
| Batch ID R255452 | Test Name : SUB_O&G_1664 | | Matrix: Water | | | |
| HS15051167-01 | USOR-CP-03-150526 | 26 May 2015 10:30 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-01 | USOR-CP-03-150526 | 26 May 2015 10:30 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-01 | USOR-CP-03-150526 | 26 May 2015 10:30 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-01 | USOR-CP-03-150526 | 26 May 2015 10:30 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-02 | USOR-CP-04-150526 | 26 May 2015 14:05 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-02 | USOR-CP-04-150526 | 26 May 2015 14:05 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-02 | USOR-CP-04-150526 | 26 May 2015 14:05 | | | 02 Jun 2015 11:37 | 1 |
| HS15051167-02 | USOR-CP-04-150526 | 26 May 2015 14:05 | | | 02 Jun 2015 11:37 | 1 |

Client: Environ International Corporation
Project: USOR 31-25867P
WorkOrder: HS15051167

**QUALIFIERS,
ACRONYMS, UNITS**

| Qualifier | Description |
|------------------|---|
| * | Value exceeds Regulatory Limit |
| a | Not accredited |
| B | Analyte detected in the associated Method Blank above the Reporting Limit |
| E | Value above quantitation range |
| H | Analyzed outside of Holding Time |
| J | Analyte detected below quantitation limit |
| M | Manually integrated, see raw data for justification |
| n | Not offered for accreditation |
| ND | Not Detected at the Reporting Limit |
| O | Sample amount is > 4 times amount spiked |
| P | Dual Column results percent difference > 40% |
| R | RPD above laboratory control limit |
| S | Spike Recovery outside laboratory control limits |
| U | Analyzed but not detected above the MDL/SDL |

| Acronym | Description |
|----------------|-------------------------------------|
| DCS | Detectability Check Study |
| DUP | Method Duplicate |
| LCS | Laboratory Control Sample |
| LCSD | Laboratory Control Sample Duplicate |
| MBLK | Method Blank |
| MDL | Method Detection Limit |
| MQL | Method Quantitation Limit |
| MS | Matrix Spike |
| MSD | Matrix Spike Duplicate |
| PDS | Post Digestion Spike |
| PQL | Practical Quantitation Limit |
| SD | Serial Dilution |
| SDL | Sample Detection Limit |
| TRRP | Texas Risk Reduction Program |

CERTIFICATIONS,ACCREDITATIONS & LICENSES

| Agency | Number | Expire Date |
|-----------------|---------------------|-------------|
| Arkansas | 15-024-0 | 27-Mar-2016 |
| California | 2919 | 31-Jul-2016 |
| Dept of Defense | L2231 Rev 3-20-2014 | 22-Dec-2015 |
| Illinois | 003622 | 09-May-2016 |
| Kansas | E-10352 2014-2015 | 31-Jul-2015 |
| Louisiana | 03087 2014/2015 | 30-Jun-2015 |
| North Carolina | 624 - 2015 | 31-Dec-2015 |
| Oklahoma | 2014-128 | 31-Aug-2015 |
| Texas | T104704231-15-15 | 30-Apr-2016 |

Client: Environ International Corporation
Project: USOR 31-25867P
Work Order: HS15051167

SAMPLE TRACKING

| Lab Samp ID | Client Sample ID | Action | Date | Person | New Location |
|---------------|-------------------|--------|----------------------|--------|--------------|
| HS15051167-01 | USOR-CP-03-150526 | Login | 5/28/2015 9:18:19 PM | RPG | Sub |
| HS15051167-01 | USOR-CP-03-150526 | Login | 5/28/2015 9:18:19 PM | RPG | Sub |
| HS15051167-01 | USOR-CP-03-150526 | Login | 5/28/2015 9:18:19 PM | RPG | Sub |
| HS15051167-01 | USOR-CP-03-150526 | Login | 5/28/2015 9:18:19 PM | RPG | Sub |
| HS15051167-02 | USOR-CP-04-150526 | Login | 5/30/2015 1:04:36 PM | SDW | Sub |
| HS15051167-02 | USOR-CP-04-150526 | Login | 5/30/2015 1:04:36 PM | SDW | Sub |
| HS15051167-02 | USOR-CP-04-150526 | Login | 5/30/2015 1:04:36 PM | SDW | Sub |
| HS15051167-02 | USOR-CP-04-150526 | Login | 5/30/2015 1:04:36 PM | SDW | Sub |

Sample Receipt Checklist

Client Name: ENVIRON
Work Order: HS15051167

Date/Time Received: **26-May-2015 17:00**
Received by: **DJW**

Checklist completed by: Raegen Giga 28-May-2015 Reviewed by: Sonia West 30-May-2015
eSignature Date eSignature Date

Matrices: **water**

Carrier name: **Client**

| | | | |
|---|---|-----------------------------|---|
| Shipping container/cooler in good condition? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Not Present <input type="checkbox"/> |
| Custody seals intact on shipping container/cooler? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Not Present <input checked="" type="checkbox"/> |
| Custody seals intact on sample bottles? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Not Present <input checked="" type="checkbox"/> |
| Chain of custody present? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Chain of custody signed when relinquished and received? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Chain of custody agrees with sample labels? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Samples in proper container/bottle? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sample containers intact? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sufficient sample volume for indicated test? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| All samples received within holding time? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Container/Temp Blank temperature in compliance? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |

Temperature(s)/Thermometer(s):

5.1c/5.4c U/C IR 4

Cooler(s)/Kit(s):

24303

Date/Time sample(s) sent to storage:

05/26/2015 17:00

Water - VOA vials have zero headspace?

Yes ☐ No ☐ No VOA vials submitted ☒

Water - pH acceptable upon receipt?

Yes ☒ No ☐ N/A ☐

pH adjusted?

Yes ☐ No ☒ N/A ☐

pH adjusted by:

Login Notes:

Client Contacted:

Date Contacted:

Person Contacted:

Contacted By: 0

Regarding:

Comments:

Corrective Action:



Environmental

Cincinnati, OH
+1 513 733 5336

Everett, WA
+1 425 356 2600

Fort Collins, CO
+1 970 490 1511

Holland, MI
+1 616 399 6070

Chain of Custody Form

Page ____ of ____

COC ID: 127912

HS15051167

Environ International Corporation

USOR 31-25867P



| Customer Information | | Project Information | | ALS Project Manager: | |
|----------------------|------------------------------------|---------------------|------------------------------------|----------------------|--|
| Purchase Order | 31-25867P | Project Name | USOR 31-25867P | A | Oil & Grease |
| Work Order | | Project Number | | B | COD |
| Company Name | Environ International Corporation | Bill To Company | Environ International Corporation | C | Dissolved Oxygen |
| Send Report To | Robert Coffman | Invoice Attn | | D | pH |
| Address | 10333 Richmond Avenue Suite 910 | Address | 10333 Richmond Avenue Suite 910 | E | Cyanide - Low Level Sub to DHL Temp: 20.7°C 22.1°C |
| City/State/Zip | Houston | City/State/Zip | Houston | F | |
| Phone | (713) 470-2653 | Phone | | G | |
| Fax | (713) 470-6547 | Fax | (713) 470-6547 | H | |
| e-Mail Address | rcoffman@environcorp.com | e-Mail Address | | I | |
| | | | | J | |

| No. | Sample Description | Date | Time | Matrix | Pres. | # Bottles | A | B | C | D | E | F | G | H | I | J | Hold |
|-----|--------------------|----------|-------|--------|-------|-----------|---|---|---|---|---|---|---|---|---|---|------|
| 1 | USOR-CP-03-150526 | 05/26/15 | 10:30 | W | | 5 | X | X | X | X | X | | | | | | |
| 2 | USOR-CP-04-150526 | 05/26/15 | 14:05 | W | | 5 | X | X | X | X | X | | | | | | |
| 3 | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | |

| | | | | | | | |
|--|--|--|--|--|--|---|--|
| Sampler(s) Please Print & Sign | | Shipment Method | | Required Turnaround Time: (Check Box) | | Results Due Date: | |
| Relinquished by: <i>[Signature]</i> Relinquished by: <i>[Signature]</i> Logged by (Laboratory): <i>[Signature]</i> | | Date: 5/26/15 Time: 17:00 Date: 5/26/15 Time: 17:00 | | <input checked="" type="checkbox"/> Std 10 WK days <input type="checkbox"/> 5 WK Days <input type="checkbox"/> 2 WK Days <input type="checkbox"/> 24 Hour | | <input checked="" type="checkbox"/> Other 3 DAY <input type="checkbox"/> 24 Hour | |
| Received by: <i>[Signature]</i> Received by (Laboratory): <i>[Signature]</i> Checked by (Laboratory): <i>[Signature]</i> | | | | Notes: Cooler ID: 24303 Cooler Temp: 5.1c QC Package: (Check One Box Below) <input checked="" type="checkbox"/> Level 2 Std QC <input type="checkbox"/> Level 3 Std QC/Row da <input type="checkbox"/> Level 4 SW846/CLP <input type="checkbox"/> Other/EDD | | | |

Preservative Key: 1-HCl 2-HNO₃ 3-H₂SO₄ 4-NaOH 5-Na₂S₂O₃ 6-NaHSO₄ 7-Other 8-4°C 9-5035

- Note: 1. Any changes must be made in writing once samples and COC Form have been submitted to ALS Environmental.
 2. Unless otherwise agreed in a formal contract, services provided by ALS Environmental are expressly limited to the terms and conditions stated on the reverse.
 3. The Chain of Custody is a legal document. All information must be completed accurately.

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ED_004012_00000018-00144



02-Jun-2015

Sonia West
ALS Environmental
10450 Standcliff Rd
Suite 210
Houston, TX 77099

Re: **HS15051167**

Work Order: **15051382**

Dear Sonia,

Revision: **1**

ALS Environmental received 2 samples on 27-May-2015 for the analyses presented in the following report.

The analytical data provided relates directly to the samples received by ALS Environmental and for only the analyses requested.

Sample results are compliant with NELAP standard requirements and QC results achieved laboratory specifications. Any exceptions are noted in the Case Narrative, or noted with qualifiers in the report or QC batch information. Should this laboratory report need to be reproduced, it should be reproduced in full unless written approval has been obtained from ALS Environmental. Samples will be disposed in 30 days unless storage arrangements are made.

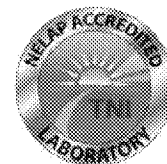
The total number of pages in this report is 12.

If you have any questions regarding this report, please feel free to contact me.

Sincerely,

Electronically approved by: Tom Beamish

Chad Whelton
Project Manager



Certificate No: MN 532786

Report of Laboratory Analysis

ADDRESS 3352 128th Avenue Holland, Michigan 49424-6283 | PHONE (616) 399-6070 | FAX (616) 399-6185

ALS GROUP USA, CORP Part of the ALS Laboratory Group A Campbell Brothers Limited Company

Environmental

www.alsglobal.com

RIGHT SOLUTIONS RIGHT PARTNER

ED_004012_00000018-00145

Client: ALS Environmental
Project: HS15051167
Work Order: 15051382

Work Order Sample Summary

| <u>Lab Samp ID</u> | <u>Client Sample ID</u> | <u>Matrix</u> | <u>Tag Number</u> | <u>Collection Date</u> | <u>Date Received</u> | <u>Hold</u> |
|--------------------|-------------------------|---------------|-------------------|------------------------|----------------------|--------------------------|
| 15051382-01 | HS15051167-01 | Water | USOR-CP-03-150526 | 05/26/15 10:30 | 05/27/15 08:00 | <input type="checkbox"/> |
| 15051382-02 | HS15051167-02 | Water | USOR-CP-04-150526 | 05/26/15 14:05 | 05/27/15 08:00 | <input type="checkbox"/> |

Client: ALS Environmental
Project: HS15051167
WorkOrder: 15051382

**QUALIFIERS,
ACRONYMS, UNITS**

| <u>Qualifier</u> | <u>Description</u> |
|-------------------------|---|
| * | Value exceeds Regulatory Limit |
| a | Not accredited |
| B | Analyte detected in the associated Method Blank above the Reporting Limit |
| E | Value above quantitation range |
| H | Analyzed outside of Holding Time |
| J | Analyte is present at an estimated concentration between the MDL and Report Limit |
| n | Not offered for accreditation |
| ND | Not Detected at the Reporting Limit |
| O | Sample amount is > 4 times amount spiked |
| P | Dual Column results percent difference > 40% |
| R | RPD above laboratory control limit |
| S | Spike Recovery outside laboratory control limits |
| U | Analyzed but not detected above the MDL |
| X | Analyte was detected in the Method Blank between the MDL and PQL, sample results may exhibit background or reagent contamination at the observed level. |

| <u>Acronym</u> | <u>Description</u> |
|-----------------------|-------------------------------------|
| DUP | Method Duplicate |
| LCS | Laboratory Control Sample |
| LCSD | Laboratory Control Sample Duplicate |
| LOD | Limit of Detection (see MDL) |
| LOQ | Limit of Quantitation (see PQL) |
| MBLK | Method Blank |
| MDL | Method Detection Limit |
| MS | Matrix Spike |
| MSD | Matrix Spike Duplicate |
| PQL | Practical Quantitation Limit |
| RPD | Relative Percent Difference |
| TDL | Target Detection Limit |
| TNTC | Too Numerous To Count |
| A | APHA Standard Methods |
| D | ASTM |
| E | EPA |
| SW | SW-846 Update III |

| <u>Units Reported</u> | <u>Description</u> |
|------------------------------|---------------------------|
| as noted | |
| mg/L | Milligrams per Liter |
| s.u. | Standard Units |

ALS Group USA, Corp

Date: 02-Jun-15

Client: ALS Environmental
Project: HS15051167
Sample ID: HS15051167-01
Collection Date: 05/26/15 10:30 AM

Work Order: 15051382
Lab ID: 15051382-01
Matrix: WATER

| Analyses | Result | Qual | Report Limit | Units | Dilution Factor | Date Analyzed |
|---------------------------------------|------------|------|--------------------|-------|-----------------|------------------------|
| <hr/> | | | | | | |
| SUBCONTRACTED ANALYSES | | | SUBCONTRACT | | | Analyst: CLIENT |
| Subcontracted Analyses | See report | | as noted | | 1 | 06/02/15 |
| CHEMICAL OXYGEN DEMAND | | | E410.4 R2.0 | | | Analyst: KF |
| Chemical Oxygen Demand | 82 | | 50 | mg/L | 1 | 05/27/15 12:00 PM |
| OXYGEN, DISSOLVED (LABORATORY) | | | E360.1 | | | Analyst: JRF |
| Oxygen, Dissolved | 10 | | | mg/L | 1 | 05/27/15 02:35 PM |
| OIL AND GREASE | | | E1664A | | | Analyst: RLM |
| Oil and Grease | ND | | 5.0 | mg/L | 1 | 05/28/15 10:00 AM |
| PH (LABORATORY) | | | SW9040C | | | Analyst: JB |
| pH (laboratory) | 6.54 | | | s.u. | 1 | 05/28/15 09:30 AM |

Note: See Qualifiers page for a list of qualifiers and their definitions.

Revision: 1

Analytical Results Page 1 of 2

ED_004012_00000018-00148

ALS Group USA, Corp

Date: 02-Jun-15

Client: ALS Environmental
Project: HS15051167
Sample ID: HS15051167-02
Collection Date: 05/26/15 02:05 PM

Work Order: 15051382
Lab ID: 15051382-02
Matrix: WATER

| Analyses | Result | Qual | Report Limit | Units | Dilution Factor | Date Analyzed |
|---------------------------------------|------------|------|--------------------|-------|-----------------|------------------------|
| <hr/> | | | | | | |
| SUBCONTRACTED ANALYSES | | | SUBCONTRACT | | | Analyst: CLIENT |
| Subcontracted Analyses | See report | | as noted | | 1 | 06/02/15 |
| CHEMICAL OXYGEN DEMAND | | | E410.4 R2.0 | | | Analyst: KF |
| Chemical Oxygen Demand | 61 | | 50 | mg/L | 1 | 05/27/15 12:00 PM |
| OXYGEN, DISSOLVED (LABORATORY) | | | E360.1 | | | Analyst: JRF |
| Oxygen, Dissolved | 10 | | | mg/L | 1 | 05/27/15 02:35 PM |
| OIL AND GREASE | | | E1664A | | | Analyst: RLM |
| Oil and Grease | ND | | 5.0 | mg/L | 1 | 05/28/15 10:00 AM |
| PH (LABORATORY) | | | SW9040C | | | Analyst: JB |
| pH (laboratory) | 6.61 | | | s.u. | 1 | 05/28/15 09:30 AM |

Note: See Qualifiers page for a list of qualifiers and their definitions.

Revision: 1

Analytical Results Page 2 of 2

ED_004012_00000018-00149

Client: ALS Environmental

QC BATCH REPORT

Work Order: 15051382

Project: HS15051167

Batch ID: R164265

Instrument ID WETCHEM

Method: A4500-H B-00

| | | | | | | | | | | |
|-----------------|--------|---|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| LCS | | Sample ID: WLCSW1-150528-R164265 | | | | Units: s.u. | | Analysis Date: 05/28/15 09:30 AM | | |
| Client ID: | | Run ID: WETCHEM_150528C | | | | SeqNo: 3294481 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| pH (laboratory) | 3.94 | 0 | 4 | 0 | 98.5 | 90-110 | 0 | | | |

| | | | | | | | | | | |
|-----------------|--------|---|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| LCS | | Sample ID: WLCSW1-150528-R164265 | | | | Units: s.u. | | Analysis Date: 05/28/15 09:30 AM | | |
| Client ID: | | Run ID: WETCHEM_150528C | | | | SeqNo: 3294491 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| pH (laboratory) | 3.94 | 0 | 4 | 0 | 98.5 | 90-110 | 0 | | | |

| | | | | | | | | | | |
|---------------------------------|--------|------------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| DUP | | Sample ID: 15051382-01C DUP | | | | Units: s.u. | | Analysis Date: 05/28/15 09:30 AM | | |
| Client ID: HS15051167-01 | | Run ID: WETCHEM_150528C | | | | SeqNo: 3294493 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| pH (laboratory) | 6.56 | 0 | 0 | 0 | 0 | | 6.54 | 0.305 | 20 | |

The following samples were analyzed in this batch:

| | |
|--------------|--------------|
| 15051382-01C | 15051382-02C |
|--------------|--------------|

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Revision: 1

QC Page: 1 of 3

ED_004012_00000018-00150

Client: ALS Environmental
 Work Order: 15051382
 Project: HS15051167

QC BATCH REPORT

Batch ID: **R164301** Instrument ID **WETCHEM** Method: **E410.4 R2.0**

| | | | | | | | | | | |
|------------------------|--------|------------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| MBLK | | Sample ID: CCB/MBLK-R164301 | | | | Units: mg/L | | Analysis Date: 05/27/15 12:00 PM | | |
| Client ID: | | Run ID: WETCHEM_150527Y | | | | SeqNo: 3295501 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Chemical Oxygen Demand | ND | 50 | | | | | | | | |

| | | | | | | | | | | |
|------------------------|--------|-----------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| LCS | | Sample ID: CCV/LCS-R164301 | | | | Units: mg/L | | Analysis Date: 05/27/15 12:00 PM | | |
| Client ID: | | Run ID: WETCHEM_150527Y | | | | SeqNo: 3295500 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Chemical Oxygen Demand | 573.6 | 50 | 600 | 0 | 95.6 | 90-110 | 0 | | | |

| | | | | | | | | | | |
|---------------------------------|--------|-----------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| MS | | Sample ID: 15051382-01B MS | | | | Units: mg/L | | Analysis Date: 05/27/15 12:00 PM | | |
| Client ID: HS15051167-01 | | Run ID: WETCHEM_150527Y | | | | SeqNo: 3295503 | | Prep Date: | | DF: 2 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Chemical Oxygen Demand | 660.8 | 100 | 600 | 82.34 | 96.4 | 90-110 | 0 | | | |

| | | | | | | | | | | |
|---------------------------------|--------|------------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| MSD | | Sample ID: 15051382-01B MSD | | | | Units: mg/L | | Analysis Date: 05/27/15 12:00 PM | | |
| Client ID: HS15051167-01 | | Run ID: WETCHEM_150527Y | | | | SeqNo: 3295504 | | Prep Date: | | DF: 2 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Chemical Oxygen Demand | 665.6 | 100 | 600 | 82.34 | 97.2 | 90-110 | 660.8 | 0.727 | 25 | |

The following samples were analyzed in this batch:

| | |
|--------------|--------------|
| 15051382-01B | 15051382-02B |
|--------------|--------------|

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Revision: 1

QC Page: 2 of 3

ED_004012_00000018-00151

Client: ALS Environmental
 Work Order: 15051382
 Project: HS15051167

QC BATCH REPORT

Batch ID: **R164348** Instrument ID **O&G** Method: **E1664A**

| | | | | | | | | | | |
|----------------|--------|--------------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| MBLK | | Sample ID: MB-R164348-R164348 | | | | Units: mg/L | | Analysis Date: 05/28/15 10:00 AM | | |
| Client ID: | | Run ID: O&G_150528A | | | | SeqNo: 3296369 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Oil and Grease | ND | 5.0 | | | | | | | | |

| | | | | | | | | | | |
|----------------|--------|---------------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| LCS | | Sample ID: LCS-R164348-R164348 | | | | Units: mg/L | | Analysis Date: 05/28/15 10:00 AM | | |
| Client ID: | | Run ID: O&G_150528A | | | | SeqNo: 3296370 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Oil and Grease | 35.5 | 5.0 | 40 | 0 | 88.8 | 78-114 | 0 | | | |

| | | | | | | | | | | |
|----------------|--------|-----------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| MS | | Sample ID: 15051427-04A MS | | | | Units: mg/L | | Analysis Date: 05/28/15 10:00 AM | | |
| Client ID: | | Run ID: O&G_150528A | | | | SeqNo: 3296386 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Oil and Grease | 35.39 | 5.0 | 40 | 1.14 | 85.6 | 78-114 | 0 | | | |

| | | | | | | | | | | |
|----------------|--------|------------------------------------|---------|---------------|------|-----------------------|---------------|---|-----------|--------------|
| DUP | | Sample ID: 15051427-02A DUP | | | | Units: mg/L | | Analysis Date: 05/28/15 10:00 AM | | |
| Client ID: | | Run ID: O&G_150528A | | | | SeqNo: 3296384 | | Prep Date: | | DF: 1 |
| Analyte | Result | PQL | SPK Val | SPK Ref Value | %REC | Control Limit | RPD Ref Value | %RPD | RPD Limit | Qual |
| Oil and Grease | 1.84 | 5.0 | 0 | 0 | 0 | 0-0 | 2.13 | 0 | 18 | J |

The following samples were analyzed in this batch:

| | |
|--------------|--------------|
| 15051382-01A | 15051382-02A |
|--------------|--------------|

Note: See Qualifiers Page for a list of Qualifiers and their explanation.

Revision: 1

QC Page: 3 of 3

ED_004012_00000018-00152

15051382



CHAIN OF CUSTODY RECORD

Page 1 of 1

Date 2 Jun 2015

COC ID 2863

Due date 29 MAY 15

Subcontractor

| | |
|-------------------------|------------|
| DHL Analytical | Phone |
| 2300 Double Creek Drive | 5123888222 |
| Round Rock, TX 78664 | Fax |

| Customer Information | | Project Information | |
|----------------------|------------|---------------------|------------|
| PO | HS15051167 | Project Name | HS15051167 |

| | | | |
|--------------|------------------------------|--------------|------------------------------|
| Company Name | ALS Houston | Company Name | ALS Houston |
| | | Inv Attn | Accounts Payable |
| Address | 10450 Standcliff Rd, Ste 210 | Address | 10450 Standcliff Rd, Ste 210 |
| | Houston, TX 77099 | | Houston, TX 77099 |
| Phone | 281-530-5656 | Phone | 281-530-5656 |
| Email1 | Sonia.West@alsglobal.com | Email2 | jumoke.lawal@alsglobal.com |

| Lab ID | Client Samp ID | Collection Date | Matrix | Analysis Requested |
|------------------|-------------------|--------------------|--------|--------------------|
| -1 HS15051167-01 | USOR-CP-03-150526 | 26-May-15 10:30 am | Water | XXX SUB |
| -2 HS15051167-02 | USOR-CP-04-150526 | 26-May-15 02:05 pm | Water | XXX SUB |

Comments Please analyze for the analysis listed above. Send report to the emails shown above.

| Relinquished by: | Date/Time: | Received by: | Date/Time: | Cooler IDs: | Report/QC Level |
|------------------|------------|--------------|------------|-------------|-----------------|
| | | | | | LEVEL IV |
| | | | | | |



Environmental

Cincinnati, OH
+1 513 733 5336

Everett, WA
+1 425 356 2600

Fort Collins, CO
+1 970 490 1511

Holland, MI
+1 616 399 6070

Chain of Custody Form

Page of

COC ID: 127912

Houston, TX
+1 281 530 5656

Middletown, PA
+1 717 944 5341

Spring City, PA
+1 610 948 4903

Salt Lake City, UT
+1 801 266 7700

South Charleston, WV
+1 304 356 3168

York, PA
+1 717 505 5280

ALS Project Manager:

ALS Work Order #: 5051382

| Customer Information | | Project Information | | Parameter/Method Request for Analysis | |
|----------------------|------------------------------------|---------------------|------------------------------------|---------------------------------------|--|
| Purchase Order | 31-25867P | Project Name | USOR-31-25867P | A | Oil & Grease |
| Work Order | | Project Number | | B | COD |
| Company Name | Environ International Corporation | Bill To Company | Environ International Corporation | C | Dissolved Oxygen |
| Send Report To | Robert Coffman | Invoice Attn | | D | pH |
| Address | 10333 Richmond Avenue Suite 910 | Address | 10333 Richmond Avenue Suite 910 | E | Cyanide - Low Level Sub to DHL Temp: 20.7°C 22.1°C |
| City/State/Zip | Houston | City/State/Zip | Houston | F | |
| Phone | (713) 470-2853 | Phone | | G | |
| Fax | (713) 470-8547 | Fax | (713) 470-8547 | H | |
| e-Mail Address | rcoffman@environcorp.com | e-Mail Address | | I | |
| | | | | J | |

| No. | Sample Description | Date | Time | Matrix | Pres. | # Bottles | A | B | C | D | E | F | G | H | I | J | Hold |
|-----|--------------------|----------|-------|--------|-------|-----------|---|---|---|---|---|---|---|---|---|---|------|
| 1 | USOR-CP-03-150526 | 05/26/15 | 10:30 | W | | 5 | X | X | X | X | X | | | | | | |
| 2 | USOR-CP-04-150526 | 05/26/15 | 14:05 | W | | 5 | X | X | X | X | X | | | | | | |
| 3 | | | | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | | | | |
| 6 | | | | | | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | | | | | | |
| 8 | | | | | | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | | | | | | |
| 10 | | | | | | | | | | | | | | | | | |

| | | | | | | | | | |
|--|----------|-----------------|---------------------------|--|--------------|--|--|------------------|--|
| Sampler(s) Please Print & Sign | | Shipment Method | | Required Turnaround Time (Check Box) | | Other <u>3 DAY</u> | | Results Due Date | |
| | | | | <input checked="" type="checkbox"/> Std 10 WK days <input type="checkbox"/> 5 WK Days <input type="checkbox"/> 2 WK Days <input type="checkbox"/> 24 Hour | | | | | |
| Relinquished by: | Date: | Time: | Received by: | Notes: | | | | | |
| <i>[Signature]</i> | 05/26/15 | 17:00 | <i>[Signature]</i> | | | | | | |
| Relinquished by: | Date: | Time: | Received by (Laboratory): | Cooler ID | Cooler Temp. | QC Packages (Check One Box Below) | | | |
| <i>[Signature]</i> | 5/26/15 | 17:00 | <i>[Signature]</i> | 24303 | 5.1°C | <input checked="" type="checkbox"/> Level 2 Std QC <input type="checkbox"/> Level 3 Std QC/Row da <input type="checkbox"/> Level 4 SW846/CLP <input type="checkbox"/> Other/EDD | | | |
| Logged by (Laboratory): | Date: | Time: | Checked by (Laboratory): | | | | | | |
| <i>[Signature]</i> | 5/27/15 | 0835 | <i>[Signature]</i> | | | | | | |
| Preservative Key: 1-HCl 2-HNO ₃ 3-H ₂ SO ₄ 4-NaOH 5-Na ₂ S ₂ O ₃ 6-NaHSO ₃ 7-Other 8-4°C 9-5035 | | | | | | | | | |

Note: 1. Any changes must be made in writing once samples and COC Form have been submitted to ALS Environmental.

2. Unless otherwise agreed in a formal contract, services provided by ALS Environmental are expressly limited to the terms and conditions stated on the reverse.

3. The Chain of Custody is a legal document. All information must be completed accurately.

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ED_004012_00000018-00154

Ex NEW Package
Express US Airbill

FedEx
Tracking
Number

8011 1596 5576

m 5/26/15
date 5/26/15
to CLIENT SERVICES Phone 281 5305656
IDBITY ALS Environmental Houston LAB
FROM 10450 STANKEFF Rd Ste 210
Houston TX ZIP 77099 4338
Internal Billing Reference

client's name JOE Ribar Phone 616 399 6070
IDBITY ALS Holland MI
FROM 3352 128TH AVE
Holland MI ZIP 49424
HOLD Saturday
HOLD Weekday



0200 Recipient's Copy

4 Express Package Service *To meet business. NOTE: Service under has changed. Please select carefully.

Next Business Day
☒ FedEx First Overnight
Expedited next business morning delivery to select locations. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
☐ FedEx Priority Overnight
Next business morning. Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
☒ FedEx Standard Overnight
Next business afternoon. Saturday Delivery NOT available.

2 or 3 Business Days
☐ FedEx 2Day A.M.
Second business morning. Saturday Delivery NOT available.
☐ FedEx 2Day
Second business afternoon. Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.
☐ FedEx Express Saver
Third business day. Saturday Delivery NOT available.

5 Packaging *Standard unless noted below.
☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other

6 Special Handling and Delivery Signature Options
☐ SATURDAY Delivery
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.
☒ No Signature Required
Package must be left without collecting a signature for delivery.
☐ Direct Signature
Someone at recipient's address may sign for delivery. Fee applies.
☐ Indirect Signature
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only. Fee applies.

Does this shipment contain dangerous goods?
Use box must be checked.
Yes ☐ No ☒
Yes: As per attached Shipper's Declaration. Yes: Shipper's Declaration not required.
Dry Ice ☐ Dry Ice, 6 LBS (100) ☐ Cargo Aircraft Only

7 Payment **BAR** fee
Sender ☒ Agent No. in Section ☐ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check
Enter FedEx Acct. No. or Credit Card No. below. Obtain receipt Agent No. ☐
Total Packages ☐ Total Weight ☐ Credit Card Auth. ☐
Rate ☐

Your liability is limited to US\$500 unless you declare a higher value. See the current FedEx Services Guide for details.

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fedex.com 1.800.86.fedex 1.800.463.3339

Sample Receipt Checklist

Client Name: **ALS - HOUSTON**

Date/Time Received: **27-May-15 08:00**

Work Order: **15051382**

Received by: **KRW**

Checklist completed by Keith Wuringa
eSignature

27-May-15
Date

Reviewed by: Tam Bramish
eSignature

02-Jun-15
Date

Matrices: **Water**

Carrier name: **FedEx**

| | | | |
|---|---|--|--|
| Shipping container/cooler in good condition? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Not Present <input type="checkbox"/> |
| Custody seals intact on shipping container/cooler? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Not Present <input type="checkbox"/> |
| Custody seals intact on sample bottles? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Not Present <input checked="" type="checkbox"/> |
| Chain of custody present? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Chain of custody signed when relinquished and received? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Chain of custody agrees with sample labels? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Samples in proper container/bottle? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sample containers intact? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sufficient sample volume for indicated test? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| All samples received within holding time? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Container/Temp Blank temperature in compliance? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sample(s) received on ice? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Temperature(s)/Thermometer(s): | <u>3.0 C</u> | | <u>SR2</u> |
| Cooler(s)/Kit(s): | <u></u> | | |
| Date/Time sample(s) sent to storage: | <u>5/27/2015 8:48:31 AM</u> | | |
| Water - VOA vials have zero headspace? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | No VOA vials submitted <input checked="" type="checkbox"/> |
| Water - pH acceptable upon receipt? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | N/A <input type="checkbox"/> |
| pH adjusted? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| pH adjusted by: | <u></u> | | |

Login Notes:

Client Contacted:

Date Contacted:

Person Contacted:

Contacted By:

Regarding:

Comments:

CorrectiveAction:

Revision: 1

SRC Page 1 of 1



June 02, 2015

Chad Whelton
ALS Laboratory Group
10450 Stancliff Rd
Suite 210
Houston, TX 77099
TEL: (281) 530-5656
FAX (281) 530-5887

Order No.: 1505296

RE:

Dear Chad Whelton:

DHL Analytical, Inc. received 2 sample(s) on 5/29/2015 for the analyses presented in the following report.

There were no problems with the analyses and all data met requirements of NELAC except where noted in the Case Narrative. All non-NELAC methods will be identified accordingly in the case narrative and all estimated uncertainties of test results are within method or EPA specifications.

If you have any questions regarding these tests results, please feel free to call. Thank you for using DHL Analytical.

Sincerely,

A handwritten signature in dark ink, appearing to read "John DuPont", written over a light gray background.

John DuPont
General Manager

This report was performed under the accreditation of the State of Texas Laboratory Certification
Number: T104704211-15-14



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Environmental

Subcontractor:

DHL Analytical
2300 Double Creek Dr

TEL: (512) 388-8222

FAX:

Round Rock, TX 78664

Acct #:

CHAIN-OF-CUSTODY RECORD

Page 1 of 1

Date: 28-May-15

COC ID: 5648

Due Da: 5/10/15

1505296

Salesperson

ALSHN Account

| Customer Information | | Project Information | | Parameter/Method Request for Analysis | | | | | | | | | | |
|----------------------|------------------------------|---------------------|------------------------------|--|---|---|---|---|---|---|---|---|---|---|
| Purchase Order | 20-15051382 | Project Name | 15051382 | A Subcontracted Analyses (SUBCONTRACT) | | | | | | | | | | |
| Work Order | | Project Number | | B | | | | | | | | | | |
| Company Name | ALS Group USA, Corp | Bill To Company | ALS Group USA, Corp | C | | | | | | | | | | |
| Send Report To | Chad Whelton | Inv Attn | Accounts Payable | D | | | | | | | | | | |
| Address | 3352 128th Avenue | Address | 3352 128th Avenue | E | | | | | | | | | | |
| | | | | F | | | | | | | | | | |
| City/State/Zip | Holland, Michigan 49424-9263 | City/State/Zip | Holland, Michigan 49424-9263 | G | | | | | | | | | | |
| Phone | (616) 399-6070 | Phone | (616) 399-6070 | H | | | | | | | | | | |
| Fax | (616) 399-6185 | Fax | (616) 399-6185 | I | | | | | | | | | | |
| eMail Address | chad.whelton@alsglobal.com | eMail CC | tom.beamish@alsglobal.com | J | | | | | | | | | | |
| ALS Sample ID | Client Sample ID | Matrix | Collection Date 24hr | Bottle | A | B | C | D | E | F | G | H | I | J |
| 15051382-01D | #1 | Water | 26/May/2015 10:30 | (1) 250PNAOH | X | | | | | | | | | |
| 15051382-02D | #2 | Water | 26/May/2015 14:05 | (1) 250PNAOH | X | | | | | | | | | |

Comments:

Please analyze the enclosed samples for low-level Cyanide (RL = 0.002 mg/L). Thank you.

Relinquished by:

Date/Time

Received by:

Date/Time

Cooler IDs

Report/QC Level

Relinquished by:

Date/Time

Received by:

Date/Time

Samples
Shipped 5/27

STD

Sample Receipt Checklist

Client Name ALS Laboratory Group

Date Received: 5/29/2015

Work Order Number 1505296

Received by JB

Checklist completed by:

Signature

5/29/2015

Date

Reviewed by

Initials

5/29/2015

Date

Carrier name FedEx 1day

| | | | |
|---|---|-----------------------------|--|
| Shipping container/cooler in good condition? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Not Present <input type="checkbox"/> |
| Custody seals intact on shipping container/cooler? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Not Present <input checked="" type="checkbox"/> |
| Custody seals intact on sample bottles? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Not Present <input checked="" type="checkbox"/> |
| Chain of custody present? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Chain of custody signed when relinquished and received? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Chain of custody agrees with sample labels? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Samples in proper container/bottle? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sample containers intact? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Sufficient sample volume for indicated test? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| All samples received within holding time? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | |
| Container/Temp Blank temperature in compliance? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | 6.0 °C |
| Water - VOA vials have zero headspace? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | No VOA vials submitted <input checked="" type="checkbox"/> |
| Water - pH<2 acceptable upon receipt? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | NA <input checked="" type="checkbox"/> LOT # |
| | Adjusted? _____ | Checked by _____ | |
| Water - pH>9 (S) or pH>12 (CN) acceptable upon receipt? | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | NA <input type="checkbox"/> LOT # 7509 |
| | Adjusted? <u>no</u> | Checked by <u>9</u> | |

Any No response must be detailed in the comments section below.

Client contacted _____ Date contacted: _____ Person contacted _____

Contacted by: _____ Regarding _____

Comments:

Corrective Action:

CLIENT: ALS Laboratory Group**Project:****Lab Order:** 1505296**CASE NARRATIVE**

Samples were analyzed using the methods outlined in the following references:

Method M4500-CN E - Cyanide Analysis

LOG IN

The samples were received and log-in performed on 5/29/2015. A total of 2 samples were received and analyzed. The samples arrived in good condition and were properly packaged. All method blanks, laboratory spikes, and/or matrix spikes met quality assurance objectives.

CLIENT: ALS Laboratory Group**Project:****Lab Order:** 1505296**Work Order Sample Summary**

| Lab Smp ID | Client Sample ID | Tag Number | Date Collected | Date Recved |
|------------|------------------|------------|-------------------|-------------|
| 1505296-01 | 15051382-01D | | 05/26/15 10:30 AM | 5/29/2015 |
| 1505296-02 | 15051382-02D | | 05/26/15 02:05 PM | 5/29/2015 |

Lab Order: 1505296
Client: ALS Laboratory Group
Project:

PREP DATES REPORT

| Sample ID | Client Sample ID | Collection Date | Matrix | Test Number | Test Name | Prep Date | Batch ID |
|-------------|------------------|-------------------|---------|-------------|--------------------|-------------------|----------|
| 1505296-01A | 15051382-01D | 05/26/15 10:30 AM | Aqueous | M4500-CN E | Cyanide Water Prep | 06/01/15 08:39 AM | 69835 |
| 1505296-02A | 15051382-02D | 05/26/15 02:05 PM | Aqueous | M4500-CN E | Cyanide Water Prep | 06/01/15 08:39 AM | 69835 |

Lab Order: 1505296
Client: ALS Laboratory Group
Project:

ANALYTICAL DATES REPORT

| Sample ID | Client Sample ID | Matrix | Test Number | Test Name | Batch ID | Dilution | Analysis Date | Run ID |
|-------------|------------------|---------|-------------|------------------------|----------|----------|-------------------|------------------|
| 1505296-01A | 15051382-01D | Aqueous | M4500-CN E | Cyanide - Water Sample | 69835 | 1 | 06/01/15 05:09 PM | UV/VIS_2_150601A |
| 1505296-02A | 15051382-02D | Aqueous | M4500-CN E | Cyanide - Water Sample | 69835 | 1 | 06/01/15 05:09 PM | UV/VIS_2_150601A |

DHL Analytical, Inc.**Date:** 02-Jun-15**CLIENT:** ALS Laboratory Group**Client Sample ID:** 15051382-01D**Project:****Lab ID:** 1505296-01**Project No:** 15051382**Collection Date:** 05/26/15 10:30 AM**Lab Order:** 1505296**Matrix:** AQUEOUS

| Analyses | Result | MDL | RL | Qual | Units | DF | Date Analyzed |
|-------------------------------|--------|-------------------|--------|------|-------|----|-------------------|
| CYANIDE - WATER SAMPLE | | M4500-CN E | | | | | Analyst: MDM |
| Cyanide, Total | ND | 0.0100 | 0.0200 | | mg/L | 1 | 06/01/15 05:09 PM |

| | | | | |
|--------------------|-----|---|----|---|
| Qualifiers: | * | Value exceeds TCLP Maximum Concentration Level | B | Analyte detected in the associated Method Blank |
| | C | Sample Result or QC discussed in the Case Narrative | DF | Dilution Factor |
| | E | TPH pattern not Gas or Diesel Range Pattern | J | Analyte detected between MDL and RL |
| | MDL | Method Detection Limit | ND | Not Detected at the Method Detection Limit |
| | RL | Reporting Limit | S | Spike Recovery outside control limits |
| | N | Parameter not NELAC certified | | |

DHL Analytical, Inc.**Date:** 02-Jun-15**CLIENT:** ALS Laboratory Group**Client Sample ID:** 15051382-02D**Project:****Lab ID:** 1505296-02**Project No:** 15051382**Collection Date:** 05/26/15 02:05 PM**Lab Order:** 1505296**Matrix:** AQUEOUS

| Analyses | Result | MDL | RL | Qual | Units | DF | Date Analyzed |
|-------------------------------|--------|-------------------|--------|------|-------|----|-------------------|
| CYANIDE - WATER SAMPLE | | M4500-CN E | | | | | Analyst: MDM |
| Cyanide, Total | ND | 0.0100 | 0.0200 | | mg/L | 1 | 06/01/15 05:09 PM |

| | | | | |
|--------------------|-----|---|----|---|
| Qualifiers: | * | Value exceeds TCLP Maximum Concentration Level | B | Analyte detected in the associated Method Blank |
| | C | Sample Result or QC discussed in the Case Narrative | DF | Dilution Factor |
| | E | TPH pattern not Gas or Diesel Range Pattern | J | Analyte detected between MDL and RL |
| | MDL | Method Detection Limit | ND | Not Detected at the Method Detection Limit |
| | RL | Reporting Limit | S | Spike Recovery outside control limits |
| | N | Parameter not NELAC certified | | |

CLIENT: ALS Laboratory Group

Work Order: 1505296

ANALYTICAL QC SUMMARY REPORT

Project:

RunID: UV/VIS_2_150601A

The QC data in batch 69835 applies to the following samples: 1505296-01A, 1505296-02A

| | | | | | | | | | | |
|-----------|----------|-----------|------------------|----------------|---------------------|------------|----------|-----------|------|---------------|
| Sample ID | MB-69835 | Batch ID: | 69835 | TestNo: | M4500-CN E | Units: | mg/L | | | |
| SampType: | MBLK | Run ID: | UV/VIS_2_150601A | Analysis Date: | 6/1/2015 5:01:00 PM | Prep Date: | 6/1/2015 | | | |
| Analyte | | Result | RL | SPK value | Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit Qual |

Cyanide, Total ND 0.0200

| | | | | | | | | | | |
|-----------|-----------|-----------|------------------|----------------|---------------------|------------|----------|-----------|------|---------------|
| Sample ID | LCS-69835 | Batch ID: | 69835 | TestNo: | M4500-CN E | Units: | mg/L | | | |
| SampType: | LCS | Run ID: | UV/VIS_2_150601A | Analysis Date: | 6/1/2015 5:01:00 PM | Prep Date: | 6/1/2015 | | | |
| Analyte | | Result | RL | SPK value | Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit Qual |

Cyanide, Total 0.207 0.0200 0.2000 0 104 85 115

| | | | | | | | | | | |
|-----------|---------------|-----------|------------------|----------------|---------------------|------------|----------|-----------|------|---------------|
| Sample ID | 1505303-01AMS | Batch ID: | 69835 | TestNo: | M4500-CN E | Units: | mg/L | | | |
| SampType: | MS | Run ID: | UV/VIS_2_150601A | Analysis Date: | 6/1/2015 5:01:00 PM | Prep Date: | 6/1/2015 | | | |
| Analyte | | Result | RL | SPK value | Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit Qual |

Cyanide, Total 0.218 0.0200 0.2000 0.01532 101 79 114

| | | | | | | | | | | |
|-----------|----------------|-----------|------------------|----------------|---------------------|------------|----------|-----------|------|---------------|
| Sample ID | 1505303-01AMSD | Batch ID: | 69835 | TestNo: | M4500-CN E | Units: | mg/L | | | |
| SampType: | MSD | Run ID: | UV/VIS_2_150601A | Analysis Date: | 6/1/2015 5:01:00 PM | Prep Date: | 6/1/2015 | | | |
| Analyte | | Result | RL | SPK value | Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit Qual |

Cyanide, Total 0.204 0.0200 0.2000 0.01532 94.2 79 114 6.59 20

Qualifiers:

B Analyte detected in the associated Method Blank

J Analyte detected between MDL and RL

ND Not Detected at the Method Detection Limit

RL Reporting Limit

J Analyte detected between SDL and RL

DF Dilution Factor

MDL Method Detection Limit

R RPD outside accepted control limits

S Spike Recovery outside control limits

N Parameter not NELAC certified

CLIENT: ALS Laboratory Group

Work Order: 1505296

ANALYTICAL QC SUMMARY REPORT

Project:

RunID: UV/VIS_2_150601A

| | | | | | | | | | | |
|----------------|------------|-----------|------------------|----------------|---------------------|------------|-----------|------|----------|------|
| Sample ID | ICV-150601 | Batch ID: | R79920 | TestNo: | M4500-CN E | Units: | mg/L | | | |
| SampType: | ICV | Run ID: | UV/VIS_2_150601A | Analysis Date: | 6/1/2015 5:01:00 PM | Prep Date: | | | | |
| Analyte | Result | RL | SPK value | Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Cyanide, Total | 0.104 | 0.0200 | 0.1000 | 0 | 104 | 85 | 115 | | | |

| | | | | | | | | | | |
|----------------|------------|-----------|------------------|----------------|---------------------|------------|-----------|------|----------|------|
| Sample ID | CCV-150601 | Batch ID: | R79920 | TestNo: | M4500-CN E | Units: | mg/L | | | |
| SampType: | CCV | Run ID: | UV/VIS_2_150601A | Analysis Date: | 6/1/2015 5:09:00 PM | Prep Date: | | | | |
| Analyte | Result | RL | SPK value | Ref Val | %REC | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Cyanide, Total | 0.211 | 0.0200 | 0.2000 | 0 | 106 | 85 | 115 | | | |

Qualifiers:

| | |
|----|---|
| B | Analyte detected in the associated Method Blank |
| J | Analyte detected between MDL and RL |
| ND | Not Detected at the Method Detection Limit |
| RL | Reporting Limit |
| J | Analyte detected between SDL and RL |

| | |
|-----|---------------------------------------|
| DF | Dilution Factor |
| MDL | Method Detection Limit |
| R | RPD outside accepted control limits |
| S | Spike Recovery outside control limits |
| N | Parameter not NELAC certified |

Page 2 of 2